2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008 08:00 AM
Secretary of State

ANNUAL REPORT				Jan 17, 2000 00:0	
DOCU 1. Entity Nam FLY TOD	MENT # L25069 PAY, INC.			Secretary of St	at
C/O LOUIS M RABIN C,7751 SW 128TH ST 7		Mailing Address C/O LOUIS M RABIN 7751 SW 128TH ST MIAMI, FL 33156			
DO NOT WRITE IN THIS SPACE				01142008 No Chg-P CR2E034 (11/05) 4. FEI Number	_
RABIN, LO 7751 SW ¹ MIAMI, FL	128TH ST	stered Agent		DO NOT WRITE IN THIS SPACE	
8. The above the obligate	tions of registered agent.		ed office or registe ad Agent signature require	tered agent, or both, in the State of Florida. I am familiar with, and acce	pt
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		5.00 May Be dded to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIRE DP RABIN, LOUIS M. 7751 SW 128 ST MIAMI, FL 33156 DST RABIN, LINDA B 7751 SW 128TH ST MIAMI, FL 33156	CTORS		U00000787634 01/18/08-80007-021 150.00	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				DO NOT WRITE IN THIS SPACE	
NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

NAME
SIREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/08 305 251 25 23 Daylore Prone