

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2008 8:00 am**  
**Secretary of State**

02-19-2008 90039 001 \*\*\*\*56.25  
02-19-2008 90039 002 \*\*\*\*75.00  
02-19-2008 90039 003 \*\*\*\*18.75

**DOCUMENT # L35942**

1. Entity Name  
**THE 525 CORPORATION**



Principal Place of Business

**C/O MARK VLASEK  
525 S.E. 6TH AVENUE  
DELRAY BEACH, FL 33483**

Mailing Address

**C/O MARK VLASEK  
525 S.E. 6TH AVENUE  
DELRAY BEACH, FL 33483**

**66001376**



01292008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0146096</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**VLASEK, MARK W  
525 S.E. 6TH AVENUE  
DELRAY BEACH, FL 33483**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PUSATERI, DANA J.
STREET ADDRESS	10323 EL CABALLO COURT
CITY - ST - ZIP	DELRAY BEACH, FL 33446

TITLE	PD
NAME	GRUBB, JAMES E.
STREET ADDRESS	6656 OHARA ST.
CITY - ST - ZIP	BOYNTON BEACH, FL

TITLE	SD
NAME	VLASEK, MARK W.
STREET ADDRESS	3235 SHERWOOD BLVD
CITY - ST - ZIP	DELRAY BEACH, FL 33445

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 oath; 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

*Mark W. Vlasek*

*2/11/08*