2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011513

FILED Apr 18, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	MORIAL DRIVE SABLES, FL 33°	124		
Current Mailing Address:		New Mailing Address:		
	MORIAL DRIVE SABLES, FL 33°	124		
El Numbe	r: 20-2408957	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame an	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
DB AGE 355 TOV				
UITE 90	VN CENTER RO 0 (TON, FL 3348)			
UITE 90 OCA RA he above	0 TON, FL 33486	6 US	ourpose of changing its register	red office or registered agent, or both,
UITE 90 OCA RA he above	0 TON, FL 33486 e named entity s e of Florida. RE:	6 US submits this statement for the		red office or registered agent, or both,
UITE 90 OCA RA he above the Stat	0 TON, FL 33486 e named entity s e of Florida. RE:	6 US		red office or registered agent, or both, Date
UITE 90 OCA RA he above the Stat	0 TON, FL 33486 e named entity s e of Florida. RE:	6 US submits this statement for the lic Signature of Registered Ag	ent	
UITE 90 OCA RA he above the Stat	O KTON, FL 33486 e named entity see of Florida. RE: Electron S AND DIRECT ED KREMPELS, DA 6960 SW 60TH	6 US submits this statement for the submits the submits statement for the submits	ent	Date
EUITE 90 OCA RA he above the State IGNATU PFFICER tte: ame: ddress:	O TON, FL 33486 e named entity se of Florida. RE: Electron S AND DIRECTED () KREMPELS, DA 6960 SW 60TH MIAMI, FL 3314	6 US submits this statement for the submits the statement for the submits stateme	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANA KREMPELS 04/18/2008 ED