FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
2011 MAY -6 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000024757

1. Entity Name PARK FIRE, INC.

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CR2E034B (11/08) 150 00

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
555 5th Avenue	2918 Cleveland Street
Suite, Apt. #, etc. Administrative Offices	Suite, Apt. #, etc.
City & State Fort Lauderdale, FL	City & State Hollywood, Fl
Zip 33301 Country	Zip 33020 Country

4. FEI Number 65-1025959 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name Scott Park

Street Address (P.O. Box Number is Not Acceptable) 2918 Cleveland Street

City Hollywood FL Zip Code 33020

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (Member, Manager) Agent signature required when reinstating)

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended AR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Scott Park
STREET ADDRESS	45 Hardy Court S. Center, #340
CITY-ST-ZIP	Gulfport, MS 39507
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
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CITY-ST-ZIP	

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Scott Park April 26, 2011 (228) 424-6217
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #