


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000040703 1. Entity Name SANZO & ASSOCIATES, INC.	
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Principal Place of Business 1095 S.W. 15TH AVENUE BOCA RATON, FL 33486	Mailing Address 1095 S.W. 15TH AVENUE BOCA RATON, FL 33486
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SANZO, STEVEN A 1095 S.W. 15TH AVE BOCA RATON, FL 33486	DO NOT WRITE IN THIS SPACE
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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: _____

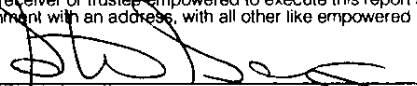
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANZO, STEVEN 1095 S.W. 15TH AVENUE BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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:  **STEVEN SANZO** 9/11/08 561 756-0631

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Sep 18, 2008 08:00 AM
Secretary of State



07052008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1041025	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required