## مدروسة

SIGNATURE: \_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 08, 2008 08:00 AN Secretary of State

Daytime Phone #

ANNUAL REPORT					May 08, 2008 08:0 Secretary of Sta		
1. Entity Nan	MENT # P0000006 FORTY, INC.	33214				Secretary of Sta	
974 BAYSHO	ce of Business ORE DRIVE RINGS, FL 34689	Mailing Address 974 BAYSHORE DRIVE TARPON SPRINGS, FL 34689			<b>                                    </b>		
Ε	OO NOT WRIT	E IN THIS SPA	CE	04252008 4. FE! Numb 59-365	No Chg-P	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent				r oo nequiou	
MARCUS, 974 BAYS TARPON		DO NOT WRITE IN THIS SPACE					
8. The above	named entity submits this statement tions of registered agent.	for the purpose of changing its register	ed office or register	ed agent, or bo	th, in the State of Flo	rida. I am familiar with, and accept	
SIGNATURE.	Sgnature, typed or printed name of registered again.	ent and little if applicable (NOTE, Register)	ed Agent signature required	when reinstating)		195 <b>M</b>	
FILE:NOWIII FEE IS \$150.00 9. Election Campaign Financing After May 1, 2008 Fee Will be \$550.00 Trust Fund Contribution				00 May Be ed to Fees	06/03/08·	80067-016 150.00	
10.	OFFICERS AN	D DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PSTD MARCUS, BRETT A 974 BAYSHORE DRIVE TARPON SPRINGS, FL 34689	) ·					
NAME STREET ADDRESS CITY+ST-ZIP		,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		,		IN	THIS SF	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			& DATE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Y					
12. I hereby of indicated of the conchanged,	certily that the information supplied w on this report or supplemental report poration or the receiver or trusted em or on an attachment with an add	ith this) ing does not qualify for it is it in a figure and that my signal powered to execute this report as required that it is the propowered.	emptions contained ture shall have the s red by Chapter 607	in Chapter 119 ame legal effec Florida Statute	, Florida Statutes. I it as if made under is; and that my name	lurther certify that the information ath; that I am an officer or director appears in Block 10 or Block 11 if	