## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071213

Entity Name: 2761 EAST OAKLAND CORP.

FILED May 21, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

3095 N. COURSE DRIVE 3095 N. COURSE DRIVE

APT 806 SUITE 806

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069

Current Mailing Address: New Mailing Address:

3095 N . COURSE DRIVE 3095 N. COURSE DRIVE APT 806 SUITE 806

POMPANNO BEACH, FL 33069 POMPANO BEACH, FL 33069

FEI Number: 65-1035226 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STRONE, CAROLYNN
3095 NORTH COURSE DRIVE
APT 309
SUITE 806

POMPANO BEACH, FL 33069 US POMPANO BEACH, FL 33069 US

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.

SIGNATURE: 05/21/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete Title: DPS (X) Change ( ) Addition

 Name:
 VANUCCHI, ROBERT
 Name:
 VANUCCHI ROBERT,

 Address:
 3095 N. COURSE DRIVE
 3095 N. COURSE DRIVE

 City-St-Zip:
 FORT LAUDERDALE, FL 33069
 City-St-Zip:
 FORT LAUDERDALE, FL 33069

Title: VPD ( ) Delete Title: D (X) Change ( ) Addition

Name: STRONE, CAROLYNN Name: STRONE, CAROLYNN

Address: 3095 NORTH COURSE DRIVE APT 309 Address: 3095 NORTH COURSE DRIVE SUITE 806

City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: POMPANO BEACH, FL 33069

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 DOLAN, JENNIFER

 Address:
 6721 N 22ND TERRACE

 City-St-Zip:
 City-St-Zip:
 FORT LAUDERDALE, FL 33309

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT VANUCCHI DPS 05/21/2008