

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2007 MAY -1 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04302007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3702846	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

DOCUMENT # P0000080782
1. Entity Name
CHEAP CHEATS, INC.



Principal Place of Business 886 CASTLETOWER ROAD TALLAHASSEE, FL 32301	Mailing Address 886 CASTLETOWER ROAD TALLAHASSEE, FL 32301
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HARDEE, CARY III
215 SE PINCKNEY ST
MADISON, FL 32340

DO NOT WRITE IN THIS SPACE

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
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HARDEE, CARY A III 215 SE PINCKNEY ST MADISON, FL 32340
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BESHARA, MARC 886 CASTLETOWER RD TALLAHASSEE, FL 32301
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05/11/07--01030--015 **150.00

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 or other like empowered

SIGNATURE: Max
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/07 850-681-7039
Date Daytime Phone #

5/20