

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000016695

Entity Name: CAREER CONCEPTS, INC.

FILED  
Jun 18, 2007  
Secretary of State

## Current Principal Place of Business:

29226 US HWY 19 N.  
SUITE #202  
CLEARWATER, FL 33761

## New Principal Place of Business:

## Current Mailing Address:

29226 US HWY 19 N.  
SUITE #202  
CLEARWATER, FL 33761

## New Mailing Address:

FEI Number: 59-3698216

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOULD, MICHAEL J  
750 N. BELTED KINGFISHER DRIVE  
PALM HARBOR, FL 34683 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GOULD, MICHAEL J  
Address: 750 N. BELTED KINGFISHER DRIVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: VP (X) Delete  
Name: GOULD, JUSTIN M  
Address: 750 N. BELTED KINGFISHER DR.  
City-St-Zip: PALM HARBOR, FL 34683

Title: ST (X) Delete  
Name: GOULD, SUSAN S  
Address: 750 N BELTED KINGFISHER DRIVE  
City-St-Zip: PALM HARBOR, FL 34683

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: GOULD, MICHAEL J  
Address: 750 N. BELTED KINGFISHER DRIVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL J. GOULD

PRES

06/18/2007

Electronic Signature of Signing Officer or Director

Date