2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000036828 1. Entity Name 829 ACQUISITION & SALES, INC.				FILED 2007 SEP 18 AM 4: 50
Principal Plac 140 ATLANT TAVERNIER,	IC CIR.	Mailing Address PO BOX 1781 ISLAMORADA, FL 33036		SECRETARY OF STATE TALLAHASSEE.FLORIDA
DO NOT WRITE IN THIS SPAC				07112007 No Chg-P CR2E034 (11/05) 4. FEI Number
MCDANIEL, GRANGER 121 OCEAN DR APT J TAVERNIER, FL 33070			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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
				.00 May Be 500109570606 led to Fees 09/18/0701024022 **550.00
10. THE NAME STREET ADDRESS CHY-SI-ZIP THE NAME STREET ADDRESS CHY-SI-ZIP	OFFICERS AND DIRECTORS D MCDANIEL, GRANGER 121 OCEAN DR APT J TAVERNIER, FL 33070 DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
HITLE NAME STREET ADDRESS CHY-ST-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CHY-ST-ZIP				
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 users an address, with all priher like empowered.				
SIGNATURE: SIGNATURE AND TYPED OR PRINTED MAJE OF SIGNING OFFICER OR DIRECTOR 9 1407 305352576 BIGNATURE Daygrap Phone #				

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