2008 FOR PROFIT CORPORATION ANNUAL REPORT



FILED May 05, 2008 8:00 am Secretary of State

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Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Country St. Certificate of Status Desired \$38.75 Addit Fee Required 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 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, at the obligations of registered agent. SiGNATURE Signature Signature Signature Signature Signature Officers and Directors TILE D OFFICERS AND DIRECTORS TILE TO THE ADDITIO	applicable
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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 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 Exchanged, or on an attachment with all other like empowered. SIGNATURE: Y. 30.08	director