## 2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P01000060734 1. Entity Name CONCEPTEAM, INC. Principal Place of Business 516 51ST ST. WEST PALM BEACH, FL 33407 Mailing Address 516 51ST ST. WEST PALM BEACH, FL 33407 DO NOT WRITE IN THIS SPACE

FILED Apr 28, 2008 08:00 AN Secretary of State

Applied For



04172008	No Chg-P	CR2E034 (11/05)

4. FEI Number

				65-111	14756		Not Applicable
				5. Certificate	e of Status Desired		75 Additional Required
	6. Name and Address of Current Regis	itered Agent	[				-
TODD, SYBIL A 516 51ST ST. WEST PALM BEACH, FL 33407			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the ptions of registered agent.			·	oth, in the State of Flori		ar with, and accept
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registere	d Agent signature	required when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	•		•
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TODD, SYBIL A 516 51ST ST. WEST PALM BEACH, FL 33407				Hannan	mm smm	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					0000009 05/20/08-9	27420 0103-016	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-			. •		·.	
12. I hereby o	l certify that the information supplied with this fi on this report or supplemental report is true a	ling does not qualify for the exe	mptions con ure shall hav	tained in Chapter 119 e the same legal effec	9, Florida Statutes. I fu	rther certify tha	at the information

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 apprecia, with all other like empowered.

SIGNATURE: SAN SULLINGED

4/17/08 561-863-8979

Daytime Phone ∉