## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 1101ano

FILED
May 07, 2007 08:00 A
Secretary of State

1. Entity Nan	MENT # P010001213 APHICS, INC.	77				
Principal Place of Business  2320 TAMIAMI TRAIL UNITS 1&2 PORT CHARLOTTE, FL 33952  PORT CHARLOTTE, FL 33952  Mailing Address  2320 TAMIAMI TRAIL UNITS PORT CHARLOTTE, FL 33952						
DO NOT WRITE IN THIS SPA			CE	05042007 No Chg-P CR2E034 (11/05)  4. FEI Number		
6. Name and Address of Current Registered Agent  LONG, ROLAND 2320 TAMIAMI TRAIL UNITE 1&2 PORT CHARLOTTE, FL 33952  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  SIGNATUR						
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRI D LONG, ROLAND 4015 COCHISE TERRACE SARASOTA, FL 34233	ECTORS			, <u>u</u> gogo	0762807
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, CYNTHIA L 4015 COCHISE TERRACE SARASOTA, FL 34233					-80023±019 150.0(
TITLE NAME STREET ADDRESS CITY-SF-ZIP	D LONG, GREGORY R 4015 COCHISE TERRACE SARASOTA, FL 34233			DO NO	T WRIT	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS	SPAC	
TITLE NAME Street Address City-St-Zip						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	12	Andrew week				
12. I hereby certify that the information supplied with this filling 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 all other like empowered.						