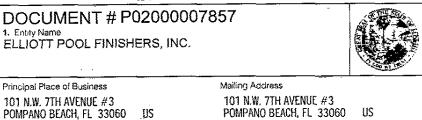
2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Aug 07, 2007 08:00 AN Secretary of State





DO NOT WRITE IN THIS SPACE

08022007 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 01-0573608 1- Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

HARRIS, WALLACE E 101 N.W. 7TH AVENUE #3 POMPANO BEACH, FL 33060

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<u>8-2-07</u>

Daytime Phone #

		was a second			
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 fame-throgationed agent and site of applicable (NOTE, Registered Agent orgreture required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Fina Due by September 14, 2007 Trust Fund Contribution			ing 🔲	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS					
HILE . NAME SIFELI ADDRESS CHY SI-ZIP	P HARRIS, WALLACE E 101 N.W. 7TH AVENUE #3 POMPANO BEACH, FL 33060		Unn000771581 08/07/07-80007-019 158.75 DO NOT WRITE IN THIS SPACE		
HILLE NAME STREET ADDRESS CHY-ST-ZIP					
HILL NAME SIMELI ADDRESS CHY ST-ZIP					
THEE MAME SHEET ADDRESS CATY ST-ZIP					
HILLE NAME SHREET ADDRESS CIEV-SI-ZIP					
MAME NAME SHEET ADDRESS CHY SI-ZIP					
12. I hereby certify that the information supplied with this lilling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I Turther 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 cath; 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.					

ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR