2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081521

KAYE, ALAN

11030 NAUTILUS DRIVE

COOPER CITY, FL 33026

Name:

Address: City-St-Zip:

Entity Name: PDQ COOLIDGE FORMAD MANAGERS CORP.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1250 EAST HALLANDALE BEACH BLVD. SUITE 904 HALLANDALE, FL 33009 **New Mailing Address: Current Mailing Address:** 1250 EAST HALLANDALE BEACH BLVD. SUITE 904 HALLANDALE, FL 33009 FEI Number: 03-0476995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLEEMAN, PAUL 1250 EAST HALLANDALE BEACH BLVD. SUITE 904 HALLANDALE, FL 33009 US 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. SIGNATURE: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CLEEMAN, PAUL Name: Name: 1250 EAST HALLANDALE BEACH BLVD. #904 Address: Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ABRAMSON, DANIEL Name: 1250 EAST HALLANDALE BEACH BLVD. #904 Address: Address: HALLANDALE, FL 33009 City-St-Zip: City-St-Zip: Title: Title: D () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL CLEEMAN P 05/01/2007