## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000084722

CENTER FOR PRO TOOLS, INC.



Principal Place of Business

Mailing Address

2202 CURRY FORD RD ORLANDO, FL 32806

2202 CURRY FORD RD

SUITE A SUITE A

ORLANDO, FL 32806

**FILED** Feb 19, 2007 08:00 Al **Secretary of State** 



No Chg-P 01182007 CR2E034 (11/05)

4. FEI Number 22-3870118 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

b. Name and Address of	Current	Registered	Agen

PATEL, SHILPA 2202 CURRY FORD RD SUITE A

ORLANDO, FL 32806

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Andreas a transfer of constructions and the second of the

## FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

10. , :	OFFICERS AND DIRECTORS
TITLE - NAME	PCEO
STREET ADDRESS CITY-ST-ZIP	2202 CURRY FORD RD, STE A ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	

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 the empowered.

SIGNATURE

OF SIGNING OFFICER OR DIRECTOR