2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107105

Entity Name: 172, INC.

FILED Apr 22, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

590 SE 12 ST 560 SE 12 ST

POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060

Current Mailing Address: New Mailing Address:

590 SE 12 ST 560 SE 12 ST

POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060

FEI Number: 75-3083057 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHULMISTER, M. ROSS SHULMISTER, M. ROSS 590 SE 12 ST 560 SE 12 ST

POMPANO BEACH, FL 33060 US POMPANO BEACH, FL 33060 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: 04/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

DPST () Delete Title: DPST (X) Change () Addition

Name: SHULMISTER, M. ROSS Name: SHULMISTER, M. ROSS

Address: 590 SE 12 ST Address: 560 SE 12 ST

City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: SHULMISTER, BENITA Name: SHULMISTER, BENITA

Address: 590 SE 12 ST Address: 560 SE 12 ST

City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060

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.

SIGNATURE: M. ROSS SHULMISTER PRES 04/22/2009