
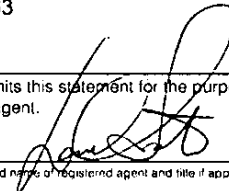
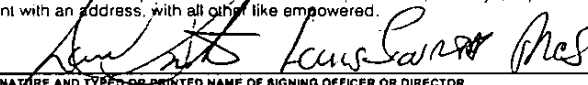


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90101 003 \*\*\*150.00

<b>DOCUMENT # P03000019902</b> 1. Entity Name <b>SELECT &amp; RESET, INC.</b>			
Principal Place of Business <b>24761 US HWY. 19 N SUITE 630 CLEARWATER, FL 33763</b>		Mailing Address <b>24761 US HWY. 19 N SUITE 630 CLEARWATER, FL 33763</b>	
2. Principal Place of Business - No P.O. Box # <b>2430 Estancia Blvd</b>		3. Mailing Address <b>2430 Estancia Blvd.</b>	
Suite, Apt. #, etc. <b>Suite 108</b>		Suite, Apt. #, etc. <b>Suite 108</b>	
City & State <b>Clearwater, FL</b>		City & State <b>Clearwater, FL</b>	
Zip <b>33761</b> Country <b>US</b>		Zip <b>33761</b> Country <b>US</b>	
4. FEI Number <b>55-0821979</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>SCOURTAS, LOUIS C 24761 US HWY. 19 N SUITE 630 SUITE 630 CLEARWATER, FL 33763</b>		7. Name and Address of New Registered Agent Name <b>Scourtas, Louis C.</b> Street Address (P.O. Box Number is Not Acceptable) <b>2430 Estancia Blvd.</b> <b>Suite 108</b> City <b>Clearwater</b> <b>FL</b> Zip Code <b>33761</b>	
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 		Louis C. Scourtas <b>4/25/07</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE <b>D</b> <input type="checkbox"/> Delete NAME <b>SCOURTAS, LOUIS C</b> STREET ADDRESS <b>24761 US HWY. 19 N SUITE 630</b> CITY-ST-ZIP <b>CLEARWATER, FL 33763</b>	TITLE <b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME <b>Scourtas, Louis C.</b> STREET ADDRESS <b>2430 Estancia Blvd. Suite 108</b> CITY-ST-ZIP <b>Clearwater, FL 33761</b>		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing 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.			
SIGNATURE: 		<b>4/25/07 727-4430709</b> <small>Date Daytime Phone #</small>	