2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 25, 2008 08:00 A Secretary of State **DOCUMENT # P03000070153** 1. Entity Name 7822 UNIVERSITY CORP Principal Place of Business Mailing Address 7822 NO UNIVERSITY DR 7822 NO UNIVERSITY DR TAMARAC, FL 33321 TAMARAC, FL 33321 CR2E034 (11/05) 01182008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 05-0574995 Not Applicable \$8.75 Additional 5 Certificate of Status Desired Fee Required BLUM, STUART R CPA DO NOTWRITE 5511 N. UNIVERSITY DR #101 IN THIS SPACE CORAL SPRINGS, FL 33067 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) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GARMIZO, GUSTAVO STREET ADDRESS 7822 NO UNIVERSITY DR TAMARAC, FL 33321 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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

SIGNATURE:

STREET ADDRESS