## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 16, 2008 8:00 am Secretary of State

DOCUI 1. Entity Nam RYAN DE	e	#P03000071	299				04	-16-2008 9001	5 010 *	**150.00	
Principal Place 11917 SEMII LARGO, FL 3	VOLE BLVD.		Mailing Address 11917 SEMINOLE BLVD LARGO, FL 33778			60023841					
Principal Place of Business - No P.O. Box # 3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04042008	Chg-P	CR2E	034 (12/06)	
City & State			City & State				4. FEI Numbe 54-2119			<del></del>	plied For t Applicable
Zip	Country		Zip Coun		try		<u> </u>	of Status Desired		\$8.75 Add Fee Required	
	6. Name	and Address of Current	Registered Agent		ļ		7. Name and	Address of New R	egistered	Agent	
DEAN, NO 8079 98TH SEMINOLE	STREET			Name Street Ad	dress (	P.O. Box Numbe	r is Not Acceptable	e)			
			<i>I</i>		City		<del></del>		FL	Zip Code	,
	named entitions of regist		or the purpose of changing its	register	ed office or	register	red agent, or bot	h, in the State of Fk	orida. I am	familiar with,	and accept
SIGNATURE.	Signature, typed	or printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signatur	o required	d when reinstating)		DATE		
FIL After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 8 Fee will be \$550.	9. Election Campa  Trust Fund Cont			\$5. Add	.00 May Be led to Fees				
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AN	D DIRECTORS	
TITLE	DP		☐ Delete	πL				,		Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		YAN T ID AVENUE S PARK, FL 33781			EET ADDRESS -ST-ZIP	807 Sem	9 98 A	H. N L 3311 1	7		· ·
IITLE			☐ Delete	TITL	E [	<u> </u>				☐ Change	Addition
NAME			그 그 그 사람들이 되었다.	, I	ET ADDRESS		45.45	<u> </u>		•	
STREET ADDRESS	\$4,800 E.		The Same Same		-ST-ZIP		, ,	. , ,	ية جرد وي		are .
TITLE NAME	4 1 2		Delete	TITL						Change C	Addition
STREET ADDRESS CITY-ST-ZIP			المرابط للمستسب المراب	STR	EET ADORESS ST-ZIP						
TITLE NAME			☐ Delete	TITL	1					Change	Addition
STREET ADDRESS CITY-ST-ZIP	<b>,</b>			•	EET ADORESS (-ST-ZIP			-			
TITLE			☐ Oelete	TITL	1			— ————		☐ Change	Addition
STREET ADDRESS					EET ADORESS Y-ST-ZIP						
TITLE	<del>                                     </del>		☐ Delete	. 1111	1			,		Change	Addition
NAME STREET ADDRESS		•			IEET ADORESS Y-ST-ZIP						
CITY-ST-ZIP	nertific that #	ne information cumuliari wi	th this filing does not qualify t			ontaine	d in Chapter 119	9, Florida Statutes.	i further co	entify that the i	ntormation
indicated of the co-	on this reportion or a control of the control of th	ort or supplemental report the receiver or trustee em- tachment with an address	th this filling does not qualify fis true and accurate and that cowered to execute this report with all other like empowered	my signa t as requ j.	ature shall h ired by Cha	ave the oter 60		ct as it made under es; and that my nan	oath; that ne appears	iam an Oilice In Block 10 o	r Block 11 if
	and the same of the	VIT (AA. ) /		2	7.7			11-0		,	e-