2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # P03000087066 1. Entity Name FRANK LOOSE, INC.						8 90387 025	***150.	00
Principal Place	e of Business	Mailing Address	<u>'</u>		0 20			
2138 SW IMPERIAL ST. 1958 SE PT. ST. LUCIE BLVI				•				
PORT SAINT LUCIE, FL 34987 PT. ST. LUCIE, FL 34952								
				1 (88)(88) 21	38183 1811 53 11 53 84 5			II II I PS I
Principal Place of Business - No P.O. Box # Address								
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Suite, Apt. #, etc. Suite, Apt. #, etc.				04040000	Ob - D	00000047	40/00)	
				04042008	Chg-P	CR2E034 (12/00)	
City & State	e	City & State	City & State		er	, , .	Appli	ied For
Only & State		Ony a state	City & State					
<u> </u>			T .	20-014	3230			Applicable
Zip	Country	Zip	Country	5. Certificate	of Status Desired		75 Additio	onal
						Fee Fee	Required	
	6. Name and Address of Cu	rrent Registered Agent		7. Name and	Address of New	Registered Agen	ıt	
			Name					
LOOSE, FI	RANKLIN B							
2138 SW II	MPERIAL ST.		Street Add	dress (P.O. Box Numb	er is Not Acceptal	ble)		
PORT SAI	NT LUCIE, FL 34987							
			0:					
			City			FL i ³	Zip Code	
8 The above	named entity submits this statem	ent for the ournose of changing	its registered office or r	egistered agent, or bo	th in the State of	Florida Lam famil	ier with an	d accept
	tions of registered agent.	ent to the purpose of changing	its registered unice of it	egistered agent, or oc	in, in the state of	пона. гантани	iai witi, aii	io accept
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
			· · · · · · · · · · · · · · · · · · ·					
	E NOWW. EEE 16 6450 0.	9. Election Cam	paign Financing					
	E NOW!!! FEE IS \$150.0			\$5.00 May Be Added to Fees			·	
	E NOW!!! FEE I\$ \$150.0 ay 1, 2008 Fee will be \$:	·		\$5.00 May Be				
	ay 1, 2008 Fee will be \$			\$5.00 May Be Added to Fees	CHANGES TO O		ECTORS II	N 11
After Ma	ay 1, 2008 Fee will be \$	Trust Fund Co	ontribution.	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR		
After Ma	ay 1, 2008 Fee will be \$5 OFFICERS	550.00 Trust Fund Co	ontribution	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR		N 11
After Ma 10. TITLE NAME	ay 1, 2008 Fee will be \$1 OFFICERS PD LOOSE, FRANKLIN B	Trust Fund Co	11. TITLE NAME	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR		
10. TITLE NAME STREET ADDRESS	OFFICERS PD LOOSE, FRANKLIN B 2138 SWIMPERIAL ST.	Trust Fund Co	TIL. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR		
After Ma 10. TITLE NAME	OFFICERS PD LOOSE, FRANKLIN B 2138 SW IMPERIAL ST. PORT SAINT LUCIE, FL 34	Trust Fund Co	11. TITLE NAME	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR		
10. TITLE NAME STREET ADDRESS	OFFICERS PD LOOSE, FRANKLIN B 2138 SWIMPERIAL ST.	Trust Fund Co	TIL. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR	Change	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS PD LOOSE, FRANKLIN B 2138 SW IMPERIAL ST. PORT SAINT LUCIE, FL 34	Trust Fund Co AND DIRECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR	Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS PD LOOSE, FRANKLIN B 2138 SW IMPERIAL ST. PORT SAINT LUCIE, FL 34	Trust Fund Co	TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees	CHANGES TO O	FFICERS AND DIR	Change	Addition
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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 only, 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.

CITY-ST-ZIP

SIGNATURE: Franklin B. Loose Trauble B Josse

CITY-ST-ZIP

4/24/08 (772)336-0134