

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000097237

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: SUNSETS TANNING SALON II, INC.

**Current Principal Place of Business:**

9810 ALTERNATE A1A  
117  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

6315 ADAMS ST.  
JUPITER, FL 33458

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ZARECZNY, MICHAEL  
6315 ADAMS ST.  
JUPITER, FL 33458 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P,TR ( ) Delete  
Name: ZARECZNY, MICHAEL  
Address: 6315 ADAMS ST.  
City-St-Zip: JUPITER, FL 33458

Title: VP ( ) Delete  
Name: ZARECZNY, NOELLE  
Address: 6315 ADAMS ST.  
City-St-Zip: JUPITER, FL 33458

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL J. ZARECZNY

PR

01/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date