

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110739

**FILED**  
**Apr 26, 2007**  
**Secretary of State**

**Entity Name:** PEAK PERFORMANCE PARTNERS, INC.

**Current Principal Place of Business:**

4923 TROPICAL GARDENS DRIVE  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

136 NE 19TH COURT  
F104  
WILTON MANORS, FL 33305

**Current Mailing Address:**

4923 TROPICAL GARDENS DRIVE  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

136 NE 19TH COURT  
F104  
WILTON MANORS, FL 33305

FEI Number: 20-0282121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHAPPLE, AARON  
4923 TROPICAL GARDENS DRIVE  
BOYNTON BEACH, FL 33436 US

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

CHAPPLE, AARON  
136 NE 19TH COURT  
F104  
WILTON MANORS, FL 33305 US

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

04/26/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CHAPPLE, AARON  
Address: 4923 TROPICAL GARDENS DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436

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

Title: P (X) Change ( ) Addition  
Name: CHAPPLE, AARON  
Address: 136 NE 19TH COURT  
City-St-Zip: WILTON MANORS, FL 33305

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: AARON CHAPPLE

Electronic Signature of Signing Officer or Director

PRES

04/26/2007

Date