


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90097 004 \*\*\*150.00

<b>DOCUMENT # P03000136304</b>	
1. Entity Name <b>JUSTIN GUERCIO, INC.</b>	

Principal Place of Business <b>1938 SW BILTMORE ST PORT SAINT LUCIE, FL 34984</b>	Mailing Address <b>2562 SW CARPENTER ST PORT SAINT LUCIE, FL 34984</b>
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40014110



01112007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-0420408</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>ACCESS ACCOUNTING, INC. 432 SW LAKEHURST DR PORT SAINT LUCIE, FL 34984</b>	
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DIR GUERCIO, JUSTIN 2562 SW CARPENTER ST PORT SAINT LUCIE, FL 34984</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P GUERCIO, JUSTIN 2562 SW CARPENTER ST PORT SAINT LUCIE, FL 34984</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S GUERCIO, JUSTIN 2562 SW CARPENTER ST PORT SAINT LUCIE, FL 34984</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Justin Guercio **JUSTIN GUERCIO** 2-8-07 **772-878-6724**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #