2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001388

Address:

City-St-Zip:

849 WYMORE RD, APT 34B

ALTAMONTE SPRINGS, FL 32714

FILED Jul 12, 2007 Secretary of State

Entity Nai	me: STEPH	ENS FAMILY,	INC.				
Current Principal Place of Business:				New Principa	New Principal Place of Business:		
7190 HWY FERN PAF	′ 17-92 RK, FL 32730)					
Current Mailing Address:				New Mailing A	New Mailing Address:		
1251 JASN APOPKA,							
FEI Number:	: 80-0089585	FEI Number	Applied For ()	FEI Number Not Applicab	ole () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Ad	Name and Address of New Registered Agent:		
FLORES, PENNY N 849 S WYMORE ROAD, APT 34B ALTAMONTE SPRINGS, FL 32714 US				151 RONNIE D	FLORES, PENNY N 151 RONNIE DRIVE ALTAMONTE SPRINGS, FL 32714 US		
	named entity e of Florida.	y submits this	statement for the p	urpose of changing its re	egistered office or registered agent, or both,		
SIGNATURE:					07/12/2007		
Electronic Signature of Registered Agent				nt	Date		
		193(2)(b), F.S., th ing Trust Fund C		t receive the prior notice.			
OFFICERS AND DIRECTORS:				ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PTD (STEPHENS, V 1251 JASMIN APOPKA, FL	IE RD		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V (STEPHENS, I 598 LAGORO DELTONA, FI	E TERRACE		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	S (FLORES, PE	() Delete NNY N		Title: Name:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: PENNY N FLORES S 07/12/2007