2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000016597

1. Entity Name
CONNECTING POINT, INC.

Principal Place of Business	Mailing Address
450 NW 65TH TERRACE MARGATE, FL 33063 US	450 NW 65TH TERRACE MARGATE, FL 33063 US

DO NOT WRITE IN THIS SPACE

01102007   No Chg-P   CR2E034 (11/05)

4. FEI Number 20-0720452	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TRIMBLE, CARL
450 NW 65TH TERRACE
MARGATE, FL 33063

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IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TRIMBLE, CARL
STREET ADDRESS	450 NW 65TH TERRACE
CITY-ST-ZIP	MARGATE, FL 33063

TITLE	
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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: _Carl R Trimble_   1-10-2006   954 984 9004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #