2	2007 FOR PROFIT ANNUAL	CORPORATIO REPORT	FILED Apr 30, 2007 08:00 A Secretary of State			
1. Entity Nam	MENT # P04000020					
Principal Place of Business 1293 S.E. 5TH AVENUE POMPANO BEACH, FL 33060		Mailing Address C/O MARK I. INGLES, CPA, PA 10100 WEST SAMPLE RD SUITE 326 CORAL SPRINGS, FL 33065-3973		I HANKAK KI TOKU ANAK	RENE ACIN TRIK FORM NOM C	
3 ₈ 37 - 17 - 1	O NOT WRITE	the state with some and	ACE	04252007 No		034 (11/05)
	en e			FEI Number 55-0858737 5. Certificate of Status	Desired	\$8.75 Additional Fee Required
1293 S.E.	6. Name and Address of Current R DOUGLAS 5TH AVENUE D BEACH, FL 33060	egistered Agent			T WRITI S SPACE	
the obligat	Signature, typed or printed name of registered agent an		tered Agent signature required	ed agent, or both, in the when reinstating)		familiar with, and accept
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	Trust Fund Contributio	ancing \$5. on.	00 May Be ed to Fees	.	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D D MULLINS, DOUGLAS 1293 S.E. 5TH AVENUE POMPANO BEACH, FL 33060	IRECTORS		den hij di gjer da den a geografie kan den a geografie kan den den a geografie kan den den den a geografie kan den den den den	U00000742	6. (1997) 1997 - Carlos Carlos (1997) 1997 - Carlos Carlos (1997) 1997 -
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					Bart Bart Bart Bart	
12. I hereby certify that the information supplied with the filling 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 fue and accurate and that my signature shall have the same tegal effect as if made under oath: that I am an officer or director of the corporation or the receiver of truckee 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 the empowered.						
SIGNATURE: Jour 195 Multins 4/20/07 954-510-01 09						