## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 04, 2007 8:00 am Secretary of State

DOCUMENT # P04000064710  1. Entity Name PROPER TEES, INC.						05-04-2007	90081 017 ***15	50.00
Principal Plac	e of Rusiness	Mailing Address			A O 1	02310		
6438 2ND A		6438 2ND AVE. NORTH St. Petersburg, Fl. 337	710		401	;		
[				İ			II <b>63</b> 11 <b>3                                  </b>	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address / 12645 49 57		Aqua	Da					
Suite, Apt.	Suite 300	Suite, Apt. #, etc.	•	1	04122007	Chg-P	CR2E034 (12/06)	
City & Stat	earwater, FL	City State City	,,	4	. FEI Numbe 20-3304		<b>⊢</b>	oplied For ot Applicable
<sup>Zip</sup> 33		Zip 28043	Country U.S			of Status Desired	□ \$8.75 Ad Fee Require	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
AEBERSOLD, RANDALL S				PUARTIN D. VONES				
6438 2ND AVE. NORTH ST. PETERSBURG, FL 33710			Street Ad	Street Address (P.O. Box Number is Not Acceptable) Suite 300				
			City	1/24/	wate	<u> </u>	FL Zip Coo	1°33762
The above named entity submits this statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of changing its registered of the statement for the purpose of the statement for the purpose of the statement for the purpose of the statement for the statement								
the obligat	ions of registered agent.						1/10/	_
SIGNATURE	Signature, typed or printed name of registered agent a	pd title If applicable. (NOTE: Re	gistered Agent signatur	re required who	n reinstating)		THE PATE	2_
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campaign Trust Fund Contribu		\$5.00 Added	May Be to Fees		1	
10.	OFFICERS AND (	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11
TITLE	PD	☐ Deletê	TITLE	111	1 2	A DK	Change	Addition
NAME STREET ADDRESS	AEBERSOLD, RANDALL S 6438 2ND AVE. NORTH		NAME	767	7441		Za Change	C 7.00.,10
CITY-ST-ZIP	0400 2110 /112: 11011111		STREET ADDRESS	(47	Age	17 A/C	28543	<u></u>
	ST. PETERSBURG, FL 33710		STREET ADDRESS City-St-2!P	FOR	est C	Tity, NO	28043	
TITLE	VD	☐ Delete	CITY-ST-ZIP TITLE	FOR	est C	Tity, NO	28043  © Change	Addition
NAME	VD AEBERSOLD, MARYBETH	☐ Delete	CITY-ST-ZIP TITLE NAME	164 164	Aqui	a Dx.	2 28043	Addition
	VD	☐ Delete	CITY-ST-ZIP TITLE	FOR FOR	est C Aqui	a Dx, City, N	28043  © Change  UC 28043	Addition
NAME STREET ADDRESS	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	FOR FOR	Agus 1 est	a Dx, City, A	© Change  280 4 3  © Change  UC 280 4 3  □ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH		CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME	FOR 164 FOR	Agus Agus Jest	a Dx, City, A		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH		CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS	FOR FOR	Agu.	a Dx, City, A		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	□ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME	FOR 164	Agu.	a Dx, City, A		
NAME STREET ADDRESS CITY-ST-ZIP STILE NAME STREET ADDRESS CITY-ST-ZIP	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH		CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  TITLE  NAME  TITLE  NAME	FOR 164	Agus Agus est	a Dx, City, A	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	□ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS	FOR 164	Agus Agus Yest	a Dx, City, A	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	☐ Delete ` ☐ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	FOR FOR	Agu.	a Dx, City, A	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	□ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS	FOR FOR	Aqui	a Dx, City, A	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	☐ Delete ` ☐ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS STREET ADDRESS	FOR FOR	Agu.	a Dx, City, A	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	☐ Delete  Delete  Delete  ☐ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP	FOR 164	Agua Agua	a Dx, City, A	☐ Change	Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	☐ Delete ` ☐ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS STREET ADDRESS	FOR FOR	Agu.	a Dx, City, A	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AEBERSOLD, MARYBETH 6438 2ND AVE. NORTH	☐ Delete  Delete  Delete  ☐ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME TREET ADDRESS CITY-S1-ZIP	FOR FOR	Aqui	a Dx, City, A	☐ Change	Addition Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statules. 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.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

67

828-202-4396

Dayinte Phone #