2008 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT				Apr 28, 2008 08:00	
DOCUMENT # P04000076111 1. Enlity Name SPAZIO OF FT. LAUDERDALE BEACH BLVD, INC.				Secretary of Sta	
Principal Plac	e of Business	Mailing Address		1	
	FT. LAUDERDALE BEACH BLVD. DALE, FL 33316	237-239 S. FT. LAUDE FT. LAUDERDALE, FL 3		L (BAICHDE III) BUIKI BIRII BUIKI BUIKI BUIKI BUIKI BUKI 1881 BURII 1881 BIRI KURI KURI KURI KURI KURI KURI KURI	
Principal Place of Business - No P.O. Box # 3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04022008 Chg-P CR2E034 (12/06)	
City & Stati	е	City & State		4. FEI Number Applied For 20-1112449 Not Applied For	
Zıp	Country	Z _i ρ	Country	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	
FT. LAUDE	. FT. LAUDERDALE BEACH É ERDALE, FL 33316 	_	City	(P.O. Box Number is Not Acceptable) FL Zip Code ered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOT	E: Registered Agent signature require	red when robistating) DATE.	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.	9. Election Campa Trust Fund Cont		5.00 May Be Ided to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	Р	☐ Delete	TITLE	☐ Change ☐ Additio	
NAME (VIOLEY ADDRESS	PADULA, LEONE	DEACH DIVID	NAME		
STREET ADDRESS CITY-ST-ZIP	237-239 S. FT. LAUDERDALE BEACH BLVD. FT. LAUDERDALE, FL 33316		STREET ADDRESS CITY-ST-ZIP	Hnann9920300	
ŀ	 			05/21/08-80103-930 159-750 Additio	
TITLE NAME		☐ Delete	TITLE NAME	Soli Cari San Dana a Ti Misude Ci Vendulo	
STREET ADDRESS			STREET ADDRESS		
CHY-ST-ZIP			CITY-ST-ZIP		
IIILE		☐ Delete	TITLE	☐ Change ☐ Additio	
NAME		55.50	NAME		
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CITY-ST-7IP			CITY-ST-ZIP		
TITLE		☐ Deinte	TITLE	Change [7] Additio	

CITY-ST-ZIP 12. Thereby certify that the information supplied with this 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 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 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 a other like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME ..

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

SIGNATURE: _

STREET AUDHESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

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L. PADULA SIGNATURE AND TYPED OR SNING OFFICER OR DIRECTOR

Delete

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