

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90068 035 ***150.00

DOCUMENT # P04000093938 1. Entity Name SUCCESS N SCHOOL INC.			
Principal Place of Business 1934 54TH TERRACE APT. 1 ST. PETERSBURG, FL 33712		Mailing Address P O BOX 11814 ST. PETERSBURG, FL 33733	
2. Principal Place of Business - No P.O. Box # 950 8th Av South Suite, Apt. #, etc.		3. Mailing Address 950 8th Av So Suite, Apt. #, etc.	
4. City & State Saint Petersburg FL Zip Country 33705		5. City & State Saint Petersburg FL Zip Country 33705	
6. Name and Address of Current Registered Agent JONES, BRUCE 1934 54TH TERRACE SOUTH APT. 1 ST. PETERSBURG, FL 33713		7. Name and Address of New Registered Agent Name BRUCE JONES Street Address (P.O. Box Number is Not Acceptable) 950 8th Av So City Saint Petersburg FL Zip Code 33712	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JONES, BRUCE 1934 54TH TERRACE SOUTH APT. 1 ST. PETERSBURG, FL 33713	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Bruce Jones 950 8th Av So Saint Petersburg FL 33705
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

ATTACHMENT

40107266

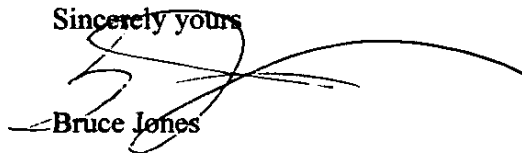
#P04000093238

May 1, 2007

Divisions of Corporations

On May 1, 2007 I attempted on several occasions to file my annual report for Success N School Inc. on your website but I couldn't due to your web site kept kicking me back to your main page. I called and talked with one of your agents and she instructed me to print out a pre printed annual report form and mail it to the Division of Corporations. She also explained, due to so much traffic the website was receiving I would not be able to do the annual report online but mail the pre printed form.

Sincerely yours



Bruce Jones