2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Feb 13, 2008 08:00 AM **DOCUMENT # P04000146080 Secretary of State** 1. Entity Name 1607 PROPERTY, INC. Principal Place of Business Mailing Address 1607 43RD STREET NORTH 1607 43RD STREET NORTH TAMPA, FL 33605 **TAMPA, FL 33605** CR2E034 (11/05) 02082008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1857660 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZAUMEYER, DAVID DO NOT WRITE **1607 43RD STREET TAMPA, FL 33605** 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 02/21/08-80064-023 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS **PST** TITLE NAME ZAUMEYER, DAVID STREET ADDRESS 1607 43RD STREET NORTH CITY-ST-ZIP **TAMPA, FL 33605** TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP