## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 21, 2008 08:00 A **DOCUMENT # P04000147014 Secretary of State** 1. Entity Name BUYER'S REP., INC. Principal Place of Business Mailing Address 100 SOUTH KENTUCKY AVENUE, SUITE 215 100 SOUTH KENTUCKY AVENUE, SUITE 215 LAKELAND, FL 33801 LAKELAND, FL 33801 03122008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1786444 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MIMS, WILLIAM T DO NOT WRITE 1524 EASTON DR LAKELAND, FL 33803 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 agenty Signature, typed or printed name of registored agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS U00000865707 04/07/08-80039-014 150.00 TITLE MIMS, WILLIAM T NAME STREET ADDRESS 100 SOUTH KENTUCKY AVENUE, SUITE 215 CITY - ST - ZIP LAKELAND, FL 33801 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITEF NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE ₩E MAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

12. I hereby 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 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.

FILED

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

CITY-ST-ZIP