2007 FOR PROFIT CORPORATION-

FILED Apr 12, 2007 08:00 A tate

ANNUAL REPORT				Secretary of St			
1. Entity Nam	MENT # P0500002742 You, Inc.	28					·
1265 SOUTH STE 13	rincipal Place of Business 265 SOUTH LANE AVE TE 13 LCKSONVILLE, FL 32205 Mailing Address 1265 SOUTH LANE AVE TE 13 STE 13 LACKSONVILLE, FL 32205						
D	O NOT WRITE I	CE	04102007 No Chg-P CR2E034 (11/05) 4. FEI Number				
	6. Name and Address of Current Reg	stered Agent					
KIM, SOO NAM 548 PROSPERITY LAKE DRIVE ST. AUGUSTINE, FL 32092					NOT W		
8. The above	named entity submits this statement for the	purpose of changing its registere	ed office or registe	red agent, or bo	th, in the State of Flo	orida. I am familia	r with, and accept
	ions of registered agent.	mm	•		4	1/10/07	
	Signature, typed or printed name of registered agent and lit	e if applicable. (NOTE: Registere	d Agent eignature require	d when reinstating)		DATE	1
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		.00 May Be led to Fees	· • · · · · · ·	·	
10.	OFFICERS AND DIR	ECTORS	<i>f</i>				· ·
NAME STREET ADDRESS CITY-ST-ZIP	D KIM, SOO NAM 548 PROSPERITY LAKE DRIVE ST. AUGUSTINE, FL 32092		:		U0 04/20	000070102 707-80038	/5 3-023 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					01120		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				-	NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SI	PACE	
TITLE NAME STREET ADDRESS CITY: ST: ZIP							

.12. Thereby 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:

There is a superior of the section o

TITLE

NAME - 1 STREET ADDRESS CITY-ST-ZIP