2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000050593

1. Entity Name

PRINCIPAL ACQUISITIONS, INC.



FILED Apr 24, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2132 E OAKLAND PARK BLVD STE 201 FT LAUDERDALE, FL 33306 2132 E OAKLAND PARK BLVD STE 201 FT LAUDERDALE, FL 33306



04072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-2672303

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, JANET 2132 E OAKLAND PARK BLVD STE 201 FT LAUDERDALE, FL 33306

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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 requires)					DATE
FiLE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be- Added to Fees	U00000320321 05/14/08-80064-002 811.25
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, JANET 2132 E OAKLAND PARK BLVD STE 2 FT LAUDERDALE, FL 33306	201			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRISTO, ROBERT 2132 E OAKLAND PARK BLVD STE 201 FT LAUDERDALE, FL 33306				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	·				,
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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 frue 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 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

ICHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Boun

4/14/08

Daytime Phone #