2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 14, 2007 08:00 AM DOCUMENT # P05000080138 **Secretary of State** 1. Entity Name ANN FOYER SECRETARIAL SERVICE, INC. Principal Place of Business Mailing Address 10829 DUCK HOOK COURT 10829 DUCK HOOK COURT SAN ANTONIO, FL 33576 SAN ANTONIO, FL 33576 02262007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 35-1643874 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FOYER, ANN DO NOT WRITE 10829 DUCK HOOK COURT SAN ANTONIO,, FL 33576 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 diapplicable. (NOTE: Registered Agent a countries recurred when registating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE FOYER, ANN NAME STREET ADDRESS 10829 DUCK HOOK COURT CITY+ST-73P SAN ANTONIO, FL 33576 TITLE NAME U00000666081 STREET ADDRESS 03/23/07-80054-025 150.00 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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

GAN FOLLER ANN FOYER
SCHATURE AND TYPED OR PROPED HANGE OF SIGNING OFFICER OR DIRECTOR

3/12/07 352-588-4339

FILED