

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000087087

Entity Name: 107 ISLAMORADA, INC.

FILED  
Apr 16, 2008  
Secretary of State

**Current Principal Place of Business:**

88500 OVERSEAS HIGHWAY  
#107  
ISLAMORADA, FL 33070

**New Principal Place of Business:**

**Current Mailing Address:**

4672 BUCIDA RD  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

FEI Number: 20-3059851

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COHEN, JOSHUA  
2761 NW 119 AVENUE  
PLANTATION, FL 33323 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COHEN, JOSHUA  
Address: 2761 NW 119 AVENUE  
City-St-Zip: PLANTATION, FL 33323

Title: VPST ( ) Delete  
Name: REIMER, MICHAEL  
Address: 4672 BUCINDA ROAD  
City-St-Zip: BOYNTON BEACH, FL 33346

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL REIMER

VP

04/16/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date