

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093013

FILED
Apr 11, 2007
Secretary of State

Entity Name: WHAT GOES AROUND COMES AROUND, INC.

Current Principal Place of Business:

703 VISION TERRACE
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

Current Mailing Address:

703 VISION TERRACE
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

FEI Number: 20-3370500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZ, DEBORAH
703 VISION TERRACE
PALM BEACH GARDENS, FL 33418 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: P () Delete
Name: KATZ, DEBORAH
Address: 703 VISION TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: KATZ, DANIEL R
Address: 703 VISION TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBORAH KATZ

P

04/11/2007

Electronic Signature of Signing Officer or Director

Date