

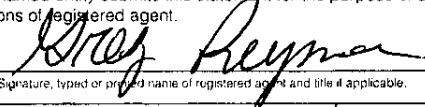
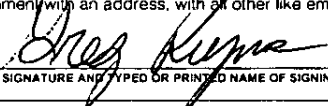


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2008 8:00 am**  
**Secretary of State**

03-24-2008 90075 010 \*\*\*150.00

|  |  |   |   |   |  |
|--|--|---|---|---|--|
| <b>DOCUMENT # P05000114195</b><br>1. Entity Name<br><b>GREGORY REYOME, INC.</b>  |  |   |   |                      |  |
| Principal Place of Business<br><b>12023 106TH STREET N<br/>LARGO, FL 33773</b>   |  |   | Mailing Address<br><b>12023 106TH STREET N<br/>LARGO, FL 33773</b>  |   |  |
| 2. Principal Place of Business - No P.O. Box #<br>Suite, Apt. #, etc.  |  | 3. Mailing Address<br>Suite, Apt. #, etc.                         |   | <b>50001441</b><br> |  |
| City & State   |  | City & State  |   | 02282008    Chg-P    CR2E034 (12/06)  |  |
| Zip    Country   |  | Zip    Country  |   | 4. FEI Number<br><b>20-3311113</b>  |  |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required   |  |   |   | Applied For<br>Not Applicable   |  |
| <b>6. Name and Address of Current Registered Agent</b><br><b>ALL FLORIDA FIRM, INC.<br/>465 S. VOLUSIA AVE.<br/>STE. C<br/>ORANGE CITY, FL 32763</b>   |  |   | <b>7. Name and Address of New Registered Agent</b><br>Name <b>GREGORY REYOME</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>12023 106th STREET N.</b><br>City <b>LARGO</b> <b>FL</b> Zip Code <b>33773</b> |   |  |
| 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    |  |   | <b>GREGORY REYOME, PRES.</b> <b>3-20-08</b>   |   |  |
| Signature, typed or printed name of registered agent and title if applicable.  |  |   | (NOTE: Registered Agent signature required when reinstating)    DATE  |   |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2008 Fee will be \$550.00</b>  |  |   | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees   |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>  |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | P<br>REYOME, GREGORY A<br>12023 106TH STREET N.<br>LARGO, FL 33773 | <input type="checkbox"/> Delete                                   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |   |   |  |
| 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 changed, or on an attachment with an address, with all other like empowered. |  |   |   |   |  |
| SIGNATURE:    |  |   | <b>GREGORY REYOME, Pres.</b> <b>3-20-08</b>   |   |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   |  |   | Date    Daytime Phone #   |   |  |