
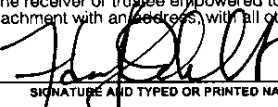


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 8:00 am
Secretary of State

01-19-2007 90023 006 ***150.00

DOCUMENT # P05000129523 1. Entity Name LEGAL BUSINESS SOLUTIONS, INC.					
Principal Place of Business 3816 W. LINEBAUGH AVE., SUITE 412-A TAMPA, FL 33618			Mailing Address 8870 N. HIMES AVE., #229 TAMPA, FL 33614-1627		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 3816 W. LINEBAUGH AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc. SUITE 412-A			
City & State		City & State TAMPA FL			
Zip	Country	Zip 33618	Country	4. FEI Number 02-0750894	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent OVERHOLT, FREDERIC J 3816 W. LINEBAUGH AVE., SUITE 412-A TAMPA, FL 33618			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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: 		FREDERIC OVERHOLT, PRESIDENT		DATE: 1/07/07	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST OVERHOLT, FREDERIC J 3816 W. LINEBAUGH AVE., SUITE 412-A TAMPA, FL 33618 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: 		FREDERIC OVERHOLT, PRESIDENT		DATE: 1/07/07	

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01172007 Chg-P CR2E034 (12/06)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

FL Zip Code

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPST
OVERHOLT, FREDERIC J
3816 W. LINEBAUGH AVE., SUITE 412-A
TAMPA, FL 33618** ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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SIGNATURE:

FREDERIC OVERHOLT, PRESIDENT

1/07/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #