2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2008 08:00 Al Secretary of State

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1. Entity Nam	MENT # P060000631						
Principal Place 208 GROUPI KISSIMMEE,		Mailing Address 208 GROUPER CT KISSIMMEE, FL 34759		E (1884) 1881 188	1801 1801 1800 E114 E11		18K 1881 8 ANI 58 I I 58 SI
	O NOT WRITE	IN THIS SPACE	CF	04162008	No Chg-P	CR2E034	· , ,
				4. FEI Numbe 20-480			Applied For Not Applicable
				5. Certificate	of Status Desired		.75 Additional Required
208 GROU	6. Name and Address of Current Re EZ, DEBORAH JPER COURT EE, FL 34759	gistered Agent		in Ça Tanı Jiril	NOT W	nate of the attack	
8. The above	e named entity submits this statement for th	P Durnose of changing its registerer	ed office or register	ad enent or hot	h in the State of Flo	vida Lamfam	iliar with and accept
the obligat	tions of registered agent	e perpose of changing its registere	o .	ed agent, or but	in, in the state of the	лод, таптап	mai with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Registered	Agent aignature required	when reinstating)		DATE	
FIL	Squature, typed or printed name of registered agent and E NOWI!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Finan	cing _ \$5.	when revisitating) OD May Be and to Fees	U00000 05/06/08-		25 158.75
FIL	Sgnature, typed or printed name of registered agent exist. E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing _ \$5.	00 May Be	000000 05/06/08-		25 158.75
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12. I hereby certify that the information supplied with this filling does not qualify to: 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 attactment with an address, with a pother like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

wzalez 4/17

305.439-9323

Daytime Phone i