2008 FOR PROFIT CORPORATION

FILED Jan 09, 2008 08:00 AN Secretary of State **ANNUAL REPORT** DOCUMENT # P06000064837 EUGENE H USOW DO PA Principal Place of Business Mailing Address 709 SEBASTIAN BLVD . , 709 SEBASTIAN BLVD. SUITE F SEBASTIAN, FL 32958 SEBASTIAN, FL 32958 US 01062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4845116 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE USOW, EUGENE H DO 709 SEBASTIAN BLVD SUITE F IN THIS SPACE SEBASTIAN, FL 32958 The state of the s 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 · After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees U00000776079 OFFICERS AND DIRECTORS 10. TITLE USOW, EUGENE HIDO NAME STREET ADDRESS 709-F SEBASTIAN BLVD. *01/09/08-80009-023<u>8150</u>700 SEBASTIAN, FL 32958 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS OD NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

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 his 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 empoyered.

SIGNATURE: .

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

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