2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 09, 2008 08:00 Al ate

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DOCUMENT # P06000113886 1. Entity Name BRADLEY LATEGAN INC					Secretary of Sta	
Principal Place	e of Business	Mailing Address				
524 SW 5TH AVE. 524 SW 5TH AVE. FORT LAUDERDALE, FL 33315 FORT LAUDERDALE, FL 33315			5			
		 				
DO NOT WRITE IN THIS SPAC						
				01072008	No Chg-P	CR2E034 (11/05)
ע	O NOI WRITE	CE	4. FEI Numbe 20-540		Applied For Not Applicable	
				5. Certificate	of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Re	gistered Agent	<u> </u>	<u> </u>		rea Kedurea
. ATTOAN DRADIEW						
LATEGAN, BRADLEY 524 SW 5TH AVE.			DO NOT WRITE IN THIS SPACE			
FORT LAUDERDALE, FL 33315						
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						
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, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution				5.00 May Be Ided to Fees		
10. OFFICERS AND DIRECTORS						
TITLE	D	· · · · · · · · · · · · · · · · · · ·	1			
NAME STREET ADDRESS	LATEGAN, BRADLEY 524 SW 5TH AVE.					
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315				ŲQOQ	00777058 8-80049-006 150.00
TITLE			1		01/09/U	8-80042-000 120.00
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NAME STREET ADDRESS				•••		
CITY ST-7IP	1		1			

12. Thereby 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP ŤITLÉ NAME STREET ADDRESS CITY-ST-ZIP