

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # P06000129143

1. Entity Name
EZ SEARCH SERVICES, INC.



Principal Place of Business
**12289 GLEN HAVEN STREET
SPRING HILL, FL 34609 US**

Mailing Address
**12289 GLEN HAVEN STREET
SPRING HILL, FL 34609 US**



04162008 No Chg-P CR2E034 (11/05)

4. FEI Number
74-3191821

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**KRAMER, DOUGLAS
12289 GLEN HAVEN STREET
SPRING HILL, FL 34609**

**DO NOT WRITE
IN THIS SPACE**

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 Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	MAZZONE-KRAMER, KAREN
STREET ADDRESS	12289 GLEN HAVEN STREET
CITY-ST-ZIP	SPRING HILL, FL 34609
TITLE	TRES
NAME	KRAMER, DOUGLAS
STREET ADDRESS	12289 GLEN HAVEN STREET
CITY-ST-ZIP	SPRING HILL, FL 34609
TITLE	SECT
NAME	KRAMER, DOUGLAS
STREET ADDRESS	12289 GLEN HAVEN STREET
CITY-ST-ZIP	SPRING HILL, FL 34609
TITLE	DIR
NAME	MAZZONE-KRAMER, KAREN
STREET ADDRESS	12289 GLEN HAVEN STREET
CITY-ST-ZIP	SPRING HILL, FL 34609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/06/08-80058-014 150.00

**DO NOT WRITE
IN THIS SPACE**

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: *Douglas Kramer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/08
Date

352 400 7798
Daytime Phone #