2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000146282

Entity Name: S7P CORP

FILED Mar 18, 2008 Secretary of State

Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:		
15536 LAKE BELLAVISTA DR TAMPA, FL 33625				1954 E. HWY 60 VALRICO, FL 33594		
Current M	lailing Addre	ss:	New Maili	New Mailing Address:		
15536 LAK TAMPA, F	KE BELLAVIST L 33625	A DR				
FEI Number:	: 87-0788106	FEI Number Applied For()	FEI Number Not Appl	icable () Certificate of Status Desired ()		
Name and	Address of (Current Registered Agent:	Name and	Address of New Registered Agent:		
SHAH, DE 1319 AIRP F-5 TALLAHAS		925 US				
	named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered office or registered agent, or both,		
SIGNATU	RE:					
	Electro	nic Signature of Registered Age	nt	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	CTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	SHAH, DEVEN	ELLAVISTA DR	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SHAH, TEJAS) Delete ELLAVISTA DR 3625	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SHAH, TANVI) Delete ELLAVISTA DR 625	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP (PATEL, MITAL 16235 IVY LAK ODESSA, FL	(E DR	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	MS () Change (X) Addition PATEL, JAYASHREE 16235 IVY LAKE DR ODESSA, FL 33556		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

	SIGNATURE: [DEVEN SHAH	PRES	03/18/2008
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