## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

04-12-2007 90042 024 \*\*\*\*71.25 P06000149074

ANNUAL REPORT										
DOCUMENT # P06000149074					ILLE	D				
1. Entity Name					Anr 2	3, 200	7 ጸ•	·nn	ΔM	
	ISTANTS, INC.		'h' -	5, 200	, 0.	100 1	. NOTATE			
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Principal Plac	e of Business	Mailing Address								
7432 CAMID AVE 7432 CAMIO AVE										
COCOA, FL 3	32927 US	-								
			1 1108251 1	I SAND DIM BANI OSM ART	i (inii Amil Ini	K BOME LOTTI OLO	itri n itri			
Principal Place of Business - No P.O. Box # 3. Mailing Address				<del></del>						
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Suite, Apt.	#, etc.	Suite, Apt. #, etc.			64072007	Chg-P	CR2E03	H (12/06)	24	
City & State	9	City & State		4. FEI Numb	"59 <i>a</i> 988	,4		plied For Applicable		
Zip	Country Zip		Coun	Country 5.		of Status Desired		8.75 Add		
6. Name and Address of Current Registered Ager					7. Name and	Address of New Re	gistered A	gent		
				Name						
WASMER, JEANNIE M				Street Address (P.O. Box Number is Not Acceptable)						
7432 CAMIO AVE COCOA, FL 32927				Street Address (F.O. DOX Number is required page by						
0000A, 1	C OLOZ.									
	_			City				Zip Code		
	A						<u>FL</u>		_	
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. It am familiar with, and accept										
the obligations of registered agent.										
SKENATURE STEAMEN MILLER Jeanne M. Wasmer 4-9.2007										
Signature flybod or printed name of registered agent and site it explicable. (NOTE: Registered Agent algorithm required when reinstating)  DATE										
FILE NOWITE FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be										
	E NOW!!! FEE IS \$150.00 py 1,2007 Fee will be \$550.0				led to Fees	,			- 1	
10.	OFFICERS AND	DIRECTORS	11.	<del> </del>	ADDITIONS	CHANGES TO OFFE	CEDS AND	DIRECTORS	E (N. 11	
TITLE	OFFICERS AND DIRECTORS 11.			7.001110113	,01044020100114	GENO MIND	☐ Change	Addition		
NAME			NAM	1						
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CITY-ST-ZIP	COCOA, FL 32927		- \$1 - Z#P							
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NAME			NAM	E [					ĺ	
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12. I hereby indicated	certify that the information supplied with lon this report or supplemental report is	this filing does not qualify for the and accurate and that n	of the exi ny signa	emptions contained ture shall have the	d in Chapter 11 same legal ette	9, Florida Statutes. I ect as il made under o	further certi ath; that I a	fy that the in m an officer	formation or director	
indicated on this report or supplemental report is five and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empoyared 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 addless, withall other like empowered.										
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SIGNAT	SIGNATURE: SIGNATURE SIGNATURE AND TYPED OF PROTECTION OF FREE CH DIRECTOR COME COME COME COME COME COME COME COME									
SIGNATURE AND TYPED OR PYINTED MAINE OF SIGNING OFFICER OR DIRECTOR Dave Dayers Prove 6										