

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000016678

FILED  
May 13, 2008  
Secretary of State

Entity Name: DARK AS KNIGHT TANNING, INC.

## Current Principal Place of Business:

10331 HICKORY HILL DRIVE  
PORT RICHEY, FL 34668

## New Principal Place of Business:

6628 RIDGE ROAD  
PORT RICHEY, FL 34668

## Current Mailing Address:

10331 HICKORY HILL DRIVE  
PORT RICHEY, FL 34668

## New Mailing Address:

6628 RIDGE ROAD  
PORT RICHEY, FL 34668

FEI Number: 87-0794999

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEDICAL HEALTH CHOICE, INC  
10331 HICKORY HILL DRIVE  
PORT RICHEY, FL 34668 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ZAVALA-KNIGHT, SHARLENE S  
Address: 10331 HICKORY HILL DRIVE  
City-St-Zip: PORT RICHEY, FL 34668 US

Title: VP ( ) Delete  
Name: KNIGHT, JASON E  
Address: 10331 HICKORY HILL DRIVE  
City-St-Zip: PORT RICHEY, FL 34668

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SHARLENE ZAVALA-KNIGHT

P

05/13/2008

Electronic Signature of Signing Officer or Director

Date