## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000033523

FILED May 03, 2008 Secretary of State

Entity Name: CPR-CELL PHONE REPAIR FRANCHISE SYSTEMS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	GAN STREET ), FL 32773			
Current Mailing Address:		New Mailing Address:		
	EVIEW DRIVE /ILLE, GA 307	47		
FEI Number:	20-8672602	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
313 RIDGE	BKI, JEREMY J EVIEW DRIVE /ILLE, FL 3074			
313 RIDGE SUMMER\ The above	EVIEW DRIVE /ILLE, FL 3074	17 US	urpose of changing its registered	d office or registered agent, or both,
313 RIDGE SUMMER\ The above	EVIEW DRIVE /ILLE, FL 3074 named entity s e of Florida.	17 US	urpose of changing its registered	d office or registered agent, or both,
313 RIDGE SUMMER\ The above n the State	EVIEW DRIVE /ILLE, FL 3074 named entity s of Florida. RE:	17 US		d office or registered agent, or both,  Date
313 RIDGE SUMMER\ The above n the State SIGNATUF	named entity set of Florida.  RE: Electron  Electron  Ce with s. 607.193	47 US submits this statement for the p	nt	
313 RIDGE SUMMER\ The above n the State SIGNATUR n accordance Election Car	named entity set of Florida.  RE: Electron  Electron  Ce with s. 607.193	us submits this statement for the particle Signature of Registered Age (3(2)(b), F.S., the corporation did no particle Fund Contribution ( ).	ent t receive the prior notice.	
313 RIDGE SUMMER\ The above n the State SIGNATUR n accordance Election Car	named entity se of Florida.  RE: Electron ce with s. 607.193 npaign Financing S AND DIREC	submits this statement for the price Signature of Registered Age (3(2)(b), F.S., the corporation did not prust Fund Contribution ( ).  TORS:  Delete  EREMY J  N DRIVE	ent t receive the prior notice.	Date

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: JEREMY KWATERSKI P 05/03/2008