2008 FOR PROFIT CORPORATION

Apr 29, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P07000077140** 04-29-2008 90091 049 ***158.75 1. Entity Name STANBURG, INC. Principal Place of Business Mailing Address 40089026 212 LAKEPONTE DRUNT 105 212 LAKEPONTE DRUNT 105 OAKLANDPARK FL 33309 OAKLANDPARK FL 33309 2. Principal Place of Business - No P.O. Box # 3. Mailing Address (P07000077140P) Suite, Apt. #, etc. Suite, Apt. #, etc. 04142008 CR2E034 (12/06) Chg-P (4. FEI Number City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **BURGESS, STEVE** Street Address (P.O. Box Number is Not Acceptable) 212 LAKEPOINTE DR UNIT 105 OAKLAND PARK, FL 33309 Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Dalete TITLE ☐ Change ☐ Addition **BURGESS, STEVE** NAME NAME 212 LAKEPOINTE DR UNIT 105 STREET ADDRESS STREET ACCRESS OAKLAND PARK, FL 33309 CITY-ST-ZIP OTY-ST-ZP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ACCIONESS STREET ACCIONS CTY-ST-ZIP CITY-ST-ZIP TILE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ACCINESS CITY-ST-ZIP CTY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ACCORESS CITY-ST-ZIP CITY-ST-ZIP TILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ALCORESS CITY-ST-ZIP CITY-ST-ZP TILE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ACCIPESS STREET ACCORESS

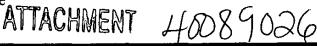
I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect 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 addrays, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

INTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED



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Entity Name 5

Detail by Entity Name

Florida Profit Corporation

STANBURG, INC.

Filing Information

Document Number P07000077140)

FEI Number

NONE

Date Filed

07/02/2007

State

FL

Status

ACTIVE

Principal Address

212 LAKEPOINTE DR UNIT 105 OAKLAND PARK FL 33309

Mailing Address

212 LAKEPOINTE DR UNIT 105 OAKLAND PARK FL 33309

Registered Agent Name & Address

BURGESS, STEVE 212 LAKEPOINTE DR UNIT 105 **OAKLAND PARK FL 33309**

Officer/Director Detail

Name & Address

Title P

BURGESS, STEVE 212 LAKEPOINTE DR UNIT 105 -**OAKLAND PARK FL 33309**

Annual Reports

No Annual Reports Filed

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