


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 19, 2008 8:00 am
Secretary of State

04-18-2008 90020 007 ***150.00

DOCUMENT # P07000133233	
1. Entity Name NA-MOR INC.	

Principal Place of Business 1915 N.E. 45TH STREET SUITE 101 FORT LAUDERDALE, FL 33308	Mailing Address 1915 N.E. 45TH STREET SUITE 101 FORT LAUDERDALE, FL 33308
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

66010934



02062008 Chg-P CR2E034 (12/06)

4. FEI Number 04-2726082	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FARAH, CHRISTOPHER G 1915 N.E. 45TH STREET SUITE 101 FORT LAUDERDALE, FL 33308		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reissuing)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete DZIURGOT, ROBERT 1915 N.E. 45TH STREET, SUITE 101 FORT LAUDERDALE, FL 33308	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 address, with all other like empowered.

SIGNATURE:  R. DZIURGOT	Date: 03/15/08	Daytime Phone: _____
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ATTACHMENT
66010934
P07000133233
NA-MOR INC.
SUITE 101
1915 N.E.45TH STREET
FORT LAUDERDALE
FLORIDA 33308

May 12, 2008

Florida Department of State
PO Box 6327
Tallahassee, Fl. 32314

Certified Letter
7007 0710 0002 4209 9499


Gentlemen:

Enclosed herein is the letter sent to us on April 29, 2008, which was postmarked on May 9, 2008.

We have included the FEI Number as requested.

Should you have any further questions, please let us know.

Yours truly,


Na-Mor Inc.

Enc.