


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2007 08:00 AM
Secretary of State


DOCUMENT # P92000004303

1. Entity Name
MACHBITZ ASSOCIATES, INC.



| | |
|---|---|
| Principal Place of Business 1560 GULF BLVD., SUITE 1607 CLEARWATER, FL 33767 US | Mailing Address 1560 GULF BLVD., SUITE 1607 CLEARWATER, FL 33767 US |
|---|---|

DO NOT WRITE IN THIS SPACE



02142007 No Chg-P CR2E034 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 59-3151850 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**MACHBITZ, KELLY
1560 GULF BLVD
SUITE 1607
CLEARWATER, FL 33767**

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P MACHBITZ, KELLY 1560 GULF BLVD. STE 1607 CLEARWATER, FL 33767 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP MACHBITZ, JACK M 1560 GULF BLVD., SUITE 1607 CLEARWATER BEACH, FL 33767 |
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04/24/07-80011-005 150.00

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IN THIS SPACE**

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: *Kelly Machbitz, President* **x 4/16/07 x 727-596-7914**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

KELLY MACHBITZ