

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000007906

Entity Name: SRS MANAGEMENT, INC.

FILED  
Apr 07, 2008  
Secretary of State

## Current Principal Place of Business:

2200 SOUTH OCEAN LANE #2906  
FT LAUDERDALE, FL 33316

## New Principal Place of Business:

## Current Mailing Address:

2200 SOUTH OCEAN LANE #2906  
FT LAUDERDALE, FL 33316

## New Mailing Address:

2200 SOUTH OCEAN LANE  
2906  
FT LAUDERDALE, FL 33316

FEI Number: 65-0371015

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHIFFER, RONALD  
2200 SOUTH OCEAN LANE #2906  
FT LAUDERDALE, FL 33316 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SCHIFFER, RONALD  
Address: 2200 SOUTH OCEAN LANE #2906  
City-St-Zip: FT LAUDERDALE, FL 33316

Title: STD ( ) Delete  
Name: SCHIFFER, STEFFI  
Address: 1350 RIVER REACH DRIVE, #507  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VD ( ) Delete  
Name: SCHIFFER, MARILYN  
Address: 2200 S. OCEAN LANE, APT 2906  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VD ( ) Delete  
Name: SCHIFFER, BURTON  
Address: 2200 S. OCEAN LANE, APT. 2906  
City-St-Zip: FORT LAUDERDALE, FL 33316

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: STEFFI SCHIFFER

STD

04/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date