2008 FOR PROFIT CORPORATION ANNUAL REPORT



FILED Mar 24, 2008 8:00 am Secretary of State

03-24-2008 90048 002 ***150.00

DOCUMENT # P94000069715 1. Entity Name

	ORP.				7				
4651 SHIRIDAN STREET, STE 300 HOLLYWOOD, FL 33021 US			Mailing Address 4651 SHIRIDAN STREET, STE 300 SUITE 210 HOLLYWOOD, FL 33021 US		40020050				
	lace of Business - No P.O. Bo		Mailing Address						
Suite, Apt.	HERIDAN STREE		Suite, Apt. #, etc.						
57 £ 300		İ	576. 300		02162008	Chg-P	CR2E03	4 (12/06)	
City & State			City & State		4. FEI Numbe	er er		Ap	plied For
HOLLYWOOD, FL			HOLLYWOOD FL		65-053	3673		No	t Applicable
Zip 33っと \	Country		330L1	Country USA	5. Certificate	of Status Desired		8.75 Add	
33.02.	6. Name and Address of	Current Regis	stered Agent	N 3 M	7. Name and	Address of New R			<u>. </u>
SOSSIN, F 4651 SHIR HOLLYWO	ROBERT J RIDAN STREET, STE 30 DOD, FL 33021	00		Street Address	3 Er.7 J. S (s (P.O. Box Numb		e)		
·							•		
				City			FL	Zip Cod	e
8. The above	named entity submits this sta	tement for the	purpose of changing its re	egistered office or regist	tered agent, or bo	th, in the State of Flo		330 amiliar with.	
the obligat	ions of registered agent.	. ا		· • · · · · · · · · · · · · · · · · · ·					
SIGNATURE_	/hbest	Ihm	LOGEN	7. 301519		,	TRACH 9	1.008	
	Signature, typed or printed name of regi	eldred agent and title		Ropistered Agent signature requi	ired when reinstating)		DATE		
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FiL After Ma	E NOW!!! FEE IS \$150 ay 1, 2008 Fee will be	0.00 \$550.00	9. Election Campaig Trust Fund Contril	~ _ ~	5.00 May Be dded to Fees				
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12. I hereby certify that the information supplied with this filling 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 altachment with an address, with all other like empowered.

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OF SIGNING OFFICER OR DIRECTOR