2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2008 08:00 AN Secretary of State **DOCUMENT # P95000017755** 1. Entity Name STEVEN M. STAMPLER C.P.A., P.A. Principal Place of Business Mailing Address 915 N. NORTHLAKE DRIVE 915 N. NORTHLAKE DRIVE HOLLYWOOD, FL 33019 HOLLYWOOD, FL 33019 04222008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0572978 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STAMPLER, STEVEN M DO NOT WRITE 915 N. NORTHLAKE DRIVE HOLLYWOOD, FL 33019 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. 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 NOWIII FEE 13 \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME STAMPLER, STEVEN M STREET ADDRESS 915 N. NORTHLAKE DRIVE CITY-ST-ZIP HOLLYWOOD, FL 33019 TITLE NAME STREET ADDRESS U00000919432 05/14/08-80003-021 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED