


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000040223  
 1. Entity Name  
 765-767 AVENUE OF THE AMERICAS CORP.



Principal Place of Business KANE, S 4112 CASE HOUSTON, TX 77005 US	Mailing Address KANE, S 4112 CASE HOUSTON, TX 77005 US
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**DO NOT WRITE IN THIS SPACE**



03152007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0600328	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 LANDIS, DANIEL  
 980 N. FEDERAL HWY., STE. 302  
 BOCA RATON, FL 33432

**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	PTD KANE, STEVEN 4112 CASE HOUSTON, TX 77005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD WRIGHT, JANET 38 OLD MILL ROAD CAPPAQUA, FL 10514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/28/07-80035-012 150.00

**DO NOT WRITE 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: Steve Kane 3/15/07 7136607684  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #