2008 FOR PROFIT CORPORATION ANNUAL REPORT

2008 FOR PROFIT CORPORATION ANNUAL REPORT				FILED May 05, 2008 8:00 am Secretary of State			
1. Entity Nam	MENT # P9600007273 STATES, INC.	37				90262 028 *	
Principal Place of Business Mailing Address 605 BAYVIEW DRIVE 605 BAYVIEW DRIVE BELLEAIR, FL 33756 US BELLEAIR, FL 33756 US				40097	ITTE ENGLÉSIN APM ASM E	TAT LIFTY HAR LIFTY OF	A (1977A) 8 7971
DO NOT WRITE IN THIS SPACE				03122008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For			
• .	6. Name and Address of Current Regi	stered Agent	· r	59-3398 5. Certificate of	3322 of Status Desired	\$8.75 Fee Req	Not Applicable Additional utred
LOVELAC 2310 W BA LARGO, F		-		NOT WE			
	named entity submits this statement for the tions of registered agent.	purpose of changing its register	ad office or register	ed agent, or both	, in the State of Florid	la. I am tamiliar w	ith, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and lab	of applicable. ONOTE: Regulare	d Agent eignebre required	under etwistering)		DATE	
	E NOW!!! PEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	· - · · ·	.00 May Be ed to Fees	· · · · · · · · · · · · · · · · · · ·	•	
10.	OFFICERS AND DIRE	CTORS		,			
MAAME STREET ADDRESS CITY+ST-ZIP	COURTNEY, W R 605 BAYVIEW DRIVE CLEARWATER, FL 33756						
TIELE NAME STREET ADDRESS CITY-ST-ZIP						· ·	
TITLE							
STREET ADDRESS CITY-SI-ZIP				DO	NOT WE	RITE .	
NAME STREET ADDRESS CITY_ST_ZIP				IN-T	HIS-SPA	ACE	
TITLE NAME STRET ADDRESS CITY-ST-ZP			. ,				
TITLE MAME STREET ADDRESS CITY-ST-ZIP							
indicated of the cor	erify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with an address, with the or on an attachment with an address, with the poration or the receiver or trustee empower or on an attachment with an address, with the poration of the poration of the poration of the poration of the poration of the poration of the poration of the poration of the poration of the poration of the porat	and accurate and that my signal of to execute this report as require	ure shall have the s	ame legal effect i	es if made under oatt	n; that I am an offic	er or director
SIGNATURE: Wa a Cum Tup 3/25/08 727 586-6667							