2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2008 08:00 AN tate

ANNOAL ILLI OILI					Sacratary of S			
1. Entity Nam	MENT # P97000021	356		Secretary of S			UI S	
	e of Business ON AVE., STE. 2 IINGS, FL 34689	Mailing Address 536 E. TARPON AVE., STE. 2 TARPON SPRINGS, FL 34689			1	11110 WED-AUTE AND END DINEAL		
D	O NOT WRITE		CE	01042008 4. FEI Numb 59-343	No Chg-P	CR2E034 (11/05) Applied Not Ap S8.75 Addition Fee Required	d For	
6. Name and Address of Current Registered Agent FERRARO, PAUL V 536 E. TARPON AVE., STE. 2 TARPON SPRINGS, FL 34689 8. The above named entity submits this statement for the purpose of changing its registere the obligations of registered agent.			DO NOT WRITE IN THIS SPACE and office or registered agent, or both, in the State of Florida. I am familiar with, and accept					
	Signature, typed or printed name of registered agent are E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaign Finar		when reinstating) 00 May Be ed to Fees	~~~	009#3744 8-80028-016 15	<u></u> 00.00	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND D DPST FERRARO, PAUL V 536 E TARPON AVE #2 TARPON SPRGS, FL 34689	RECTORS		·		`		

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.

SIGN	ATL	IRE:
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STREET ADDRESS

CITY-ST-ZIP TITLE

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Paul V
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ferraro

727 937 5171 Daytime Phone #