## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

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**SIGNATURE** 

## **FILED** Feb 09, 2007 08:00 AM DOCUMENT # P97000038354 **Secretary of State** JOHN ZACHAR, JR., & CO., INC. Principal Place of Business Mailing Address 5702 RIDDLE RD 5702 RIDDLE RD HOLIDAY, FL 34690 US HOLIDAY, FL 34690 US No Chg-P CR2E034 (11/05) 02092007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3445700 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent ZACHAR, JOHN J JR. DO NOT WRITE 5702 RIDDLE RD HOLIDAY, FL 34690 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 SIGNATURE Squarure, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ZACHAR, JOHN J JR STREET ADDRESS 5702 RIDDLE RD CITY-ST-ZIP HOLIDAY, FL 34690 nn.e NAME U00000629758 02/19/07-80013-022 150.00 STREET ADDRESS CITY-ST-ZIP IIIE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP 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 pame appears in Block 10 or Block 11 if