

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 11, 2007 8:00 am**  
**Secretary of State**

05-11-2007 90025 010 \*\*\*150.00

<b>DOCUMENT # P97000039973</b> 1. Entity Name <b>THE GORMAS GROUP, INC.</b>																																																					
Principal Place of Business 1628 N FEDERAL HWY SUITE 206 FORT LAUDERDALE FL 33308			Mailing Address PO BOX 1827 NEW PORT RICHEY FL 34653																																																		
2. Principal Place of Business - No P.O. Box # <b>8820 BELAGIO DR</b>		3. Mailing Address Suite, Apt. #, etc.																																																			
City & State <b>NEWPORT RICHEY, FL</b>		City & State		4. FEI Number <b>65-0774878</b>																																																	
Zip <b>34655</b>		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																																	
6. Name and Address of Current Registered Agent  <b>GORMAS, HARRY M</b> <b>1628 N. FEDERAL HWY</b> <b>FORT LAUDERDALE FL 33308</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code																																																		
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 <u><i>Harry M. Gormas</i></u> <span style="float: right;"><i>March 14, 2007</i></span> <small>Signature typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when transferring)</small>																																																					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																																		
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> <b>PSTD</b>  <b>GORMAS, HARRY M</b>  <b>1625 N.FEDERAL HWY -SUITE 206</b>  <b>FT LAUDERDALE FL 33308</b> </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PSTD</b> <b>GORMAS, HARRY M</b> <b>1625 N.FEDERAL HWY -SUITE 206</b> <b>FT LAUDERDALE FL 33308</b>	<input type="checkbox"/> Delete																						11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> <b>GORMAS, HARRY M</b>  <b>8820 BELAGIO DRIVE</b>  <b>NEWPORT RICHEY, FL 34655</b> </td> <td style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>GORMAS, HARRY M</b> <b>8820 BELAGIO DRIVE</b> <b>NEWPORT RICHEY, FL 34655</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																					
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u><i>Harry M. Gormas, Pres</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR</small>			Date <u><i>March 14, 2007</i></u> <span style="float: right;"><i>727-237-7216</i></span>																																																		