2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 05, 2007 08:00 AM Secretary of State

772-283-3201

ANNOAL REPORT					Secretary of State			
1. Entity Nar	MENT # P97000 - 3 : 16, INC.	068733				Seci	retary of Stat	
	ce of Business I CITY SCHOOL AVE. FL 34990	Mailing Address PO BOX 1885 PALM CITY, FL 34991			B 1710 1881 9801 8611 68	19 11 810 1 18 1 8	11 F 13 11	
	OO NOT WRI	CE	01222007 4. FEI Numbi 65-077	No Chg-P		Applied For Not Applicable \$8.75 Additional Fee Required		
2081 E. O	6. Name and Address of Cu HY, TERENCE P ICEAN BLVD. FL 34996			NOT W				
8. The above the obligation	tions of registered agent.	ent for the purpose of changing its registe	ered office or registe		th, in the State of Flo	orida, I am	familiar with, and accept	
After M	E NOWILL FEE IS \$150.00 ay 1, 2007 Fee will be \$3	ancing _ \$5	.00 May Be led to Fees					
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PVTS SITES, RUSSELL W	AND DIRECTORS DL AVE			U 02/1	00000 3/07-1	523424 30065-011 150.00	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	ILE IME REET ADDRESS TY-ST-ZIP LE IME REET ADDRESS			DO NOT WRITE IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS								

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 emergence of 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 attrustic empowered.

SIGNATURE: