2007 FOR PROFIT CORPORATION

OFFICERS AND DIRECTORS

SANDBERGEN, RUTH A

CLEARWATER, FL 33763

2070 WORLD PKWY BLVD #18

FILED ANNUAL REPORT Mar 05, 2007 08:00 AM DOCUMENT # P98000028662 **Secretary of State** RUTH A. SANDBERGEN, INC. Principal Place of Business Mailing Address 2070 WORLD PKWY BLVD #18 2070 WORLD PKWY BLVD #18 CLEARWATER, FL 33763 CLEARWATER, FL 33763 02152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3500873 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SANDBERGEN, RUTH A DO NOT WRITE 2070 WORLD PKWY BLVD #18 CLEARWATER, FL 33763 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 the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. DATE (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 Added to Fees Trust Fund Contribution

U00000655623 n3/13/07-80115-002 150.00

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP	<u></u>	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information		
indicated	d on this report or supplemental report is true and accurate and that my signal	ture shall have the same legal effect as if made under oath; that I am an officer or director
of the co	progration or the receiver or trustee empowered to execute this report as requi	red by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if
changed	d, or on an attachment with an address, with all other like empowered.	

10. TITLE

NAME

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

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

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