## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008 08:00 A
Secretary of State

			~~	~~		_	
OCUMENT	-++	· Dux		1111	ていたつ		
	11		$\mathbf{v}$	$\mathbf{u}$	<b>JUJ</b> (	I 1	

1. Entity Name
EDUCATIONAL & BUSINESS SYSTEMS INC.



Principal Place of Business

13416 BUCKETT CIRCLE PORT CHARLOTTE, FL 33981 Mailing Address

C/O S M HENSHAW ATTY PO BOX 150639 CAPE CORAL, FL 33915



DO.	NOT	WRITE	IN THIS	S SPACE

02282008	No Chg-P	CR2E034 (11/05)

4. FEI Number Applied For S5-0824470 Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BEAUGRAND, L DIETER 13416 BUCKETT CIR PORT CHARLOTTE, FL 33981

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered of	fice or r	agistered agent, or bo	th, in the State of Florida. I am fai	miliar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	If applicable (NOTE: Registered Ager	nt signatura	required when reinstating)	. DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS			•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST BEAUGRAND, L DIETER 13416 BUCKETT CIR PORT CHARLOTTE, FL 33981				U0000086439 04/04/08-80014	·
TITLE NAME STREET ADDRESS CITY-ST-ZIP					0.1.01.00.00011	COU LOUIDE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>*</sup>	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 eath; that I am an officer or director of the corporation or the receiver or trusted 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 attainment with an address, with all other like empowered.

L. Dieter Beaugrand,

SIGNATURE:

NATURE AND TYPED OR PRINTED JAME OF SIGNING OFFICER OR DIRECTO

President

Daytime Phon