


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000081186		
1. Entity Name YBOR COMEDY, INC.		
Principal Place of Business 1600 E. 8TH AVE C112 TAMPA, FL 33605	Mailing Address 1600 E. 8TH AVE C112 TAMPA, FL 33605	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent JOYCE, ROBERT 1611 VALENCIA ST CLEARWATER, FL 33766		DO NOT WRITE 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 <u><i>Robert Joyce</i></u> (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable.		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KUTASH, MITCH 9630 BEECHTREE BAINBRIDGE, OH 44023	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LEINENBACH, TODD 618 ARBOR LAKE LANES TAMPA, FL 33602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BUDNAR, SARAH 3291 EAST FAIRFAX CLEVELAND, OH 44119	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DORFMAN, ANDREW 8882 SW 57TH COOPER CITY, FL 33328	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE 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 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>Robert Joyce</i></u> 2/20/07 813-864-4000 Signature and typed or printed name of signing officer or director Date Daytime Phone #		



02212007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3537404	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

U00000647378
03/06/07-80071-007 150.00