2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000049775

1. Entity Name
MILT TANZER CORP.



FILED Apr 05, 2007 08:00 A Secretary of State

Principal Place of Business

DEERFIELD BEACH, FL 33442

Mailing Address

2269 ALBA WAY

2269 ALBA WAY DEERFIELD BEACH, FL 33442



02122007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0937371

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TANZER, MILT 2269 ALBA WAY DEERFIELD BEACH, FL 33442

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TILE NAME SIRET ADDRESS CITY-ST-ZP TILE TANZER, MILT 2289 ALBA WAY DEERFIELD BEACH, FL 33442 TILE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ITILE TANZER, MILT STREFI ADDRESS CITY-S1-ZP CITY-S1-ZP TITLE NAME SIREFI ADDRESS	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.						
After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ITILE MANE TANZER, MILT STREET ADDRESS CITY-ST-2P DEERFIELD BEACH, FL 33442 ITILE MANE ITILE MANE ITILE MANE ITILE MANE ITILE MANE STREET ADDRESS CITY-ST-2P ITILE ITILE ITILE MANE STREET ADDRESS CITY-ST-2P ITILE ITILE MANE STREET ADDRESS CITY-ST-2P ITILE MANE STREET ADDRESS CITY-ST-2P ITILE MANE STREET ADDRESS CITY-ST-2P ITILE TITLE MANE STREET ADDRESS CITY-ST-2P ITILE TITLE MANE STREET ADDRESS CITY-ST-2P ITILE TITLE							
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NAME STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH, FL 33442	10. OFFICERS AND DIRECTORS						
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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:

meter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/07

561-392-4550

Daytime Phone #