## 2907 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P99000069340

1. Entity Name

POSITIVE ENTERPRISES OF SARASOTA, INC.



FILED May 24, 2007 08:00 A Secretary of State

Principal Place of Business

3773 TARO PL.

SARASOTA, FL 34232-5551

Mailing Address

3773 TARO PL.

SARASOTA, FL 34232-5551



DO	<b>NOT</b>	<b>WRITE</b>	IN 1	ГНІЅ	<b>SPACE</b>
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05192007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0936533 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BANUCHE, DEBRA 3773 TARO PL. SARASOTA, FL. 34232-5551

## DO NOT WRITE IN THIS SPACE

SARASOTA, FL 34232-5551			IN THIS SPACE				
8. The above the obligat	named entity submits this statement for thions of registered agent.	e purpose of changing its registere	d office or	registered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				e required when reinstating)	DATE		
		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10.	OFFICERS AND DIE	RECTORS			<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BANUCHE, DEBRA 3773 TARO PL SARASOTA, FL 34232 T ALVAREZ, RUBEN 3773 TARO PL SARASOTA, FL 342325551 P			i	U00000765273 O5/31/07-80033-003 158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BANUCHE, LUIS A 3773 TARO PL. SARASOTA, FL. 342325551			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAMOS, JOSE 3773 TARO PL. SARASOTA, FL. 342325551			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE							

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 affect as if made under ceth; 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 attachnymit with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-7IP

SCHATURE AND TYPED OF PRINTED HAME OF BIOMING OFFICED OF DESCRIPTION

DEBRA A. BANGEHE

5/21/07 (941)371-709

Daytime Phone #