## **2007 FOR PROFIT CORPORATION** ANNUAL REPORT

## FILED Apr 25, 2007 08:00 All Secretary of State DOCUMENT # P99000075879 1. Entity Name 2601 EAST CORP. Principal Place of Business Mailing Address 1008 GRAND CT 1008 GRAND CT BOCA RATON, FL 33487 BOCA RATON, FL 33487 No Chg-P CR2E034 (11/05) 02262007 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0946006 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORRIS, LELAND DO NOT WRITE 1008 GRAND CT HIGHLAND BCH, FL 33487 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000729503 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 05/08/07-80042-005 158.75 OFFICERS AND DIRECTORS 10. DP TITLE MORRIS, LELAND NAME STREET ADDRESS 1008 GRAND CT HIGHLAND BEACH, FL 33487 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE C!TY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 alk other like empowered.

SIGNATURE:

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