2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000076008

City-St-Zip:

BOCA RATON, FL 33432

Entity Name: FLAKOWITZ OF BOYNTON, INC

FILED Apr 24, 2008 Secretary of State

Entity Nai	me: FLAKO	WITZ OF BOYNTON, INC.			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
7410 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33437			7410 W BOYNTON I	7410 W BOYNTON BEACH BLVD	
			B11	B11	
			BOYNTON BEACH,	BOYNTON BEACH, FL 33437	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
7410 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33437			7410 W BOYNTON I	7410 W BOYNTON BEACH BLVD	
			B11	B11	
			BOYNTON BEACH,	FL 33437	
FEI Number:	: 65-1009045	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
PIROZZI, ROBERT 7410 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33437 US			PIROZZI, ROBERT	PIROZZI, ROBERT	
				7410 W BOYNTON BEACH BLVD	
			B11 BOYNTON BEACH.	BOYNTON BEACH, FL 33437 US	
	named entit e of Florida.	γ submits this statement for the μ	ourpose of changing its register	red office or registered agent, or both,	
SIGNATURE:				04/24/2008	
	Electro	onic Signature of Registered Age	ent	Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	s () Delete	Title:	() Change () Addition	
Name:	PECHTER, K	t f	Name:	· , · · · · · · · · · · · · · · · · · ·	
Address:	8202 GLADE	S RD	Address:		
City-St-Zip:	BOCA RATO	N, FL 33434	City-St-Zip:		
Title:	V	() Delete	Title:	() Change () Addition	
Name:	PIROSSI, AN	GELO	Name:		
Address:	23233 VIA ST		Address:		
City-St-Zip:	BOCA RATO	N, FL 33433	City-St-Zip:		
Title:) Delete	Title:	() Change () Addition	
Name:	PIROZZI, RO		Name:		
Address:	1999 N FEDE	:KAL HVVY	Address:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ROBERT PIROZZI PRES 04/24/2008