## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # S86822** 

DANIEL M. DEIULIO, C.P.A., CHARTERED



**FILED** Jan 31, 2008 08:00 AN Secretary of State

Principal Place of Business 528 SOUTH U.S. 1 FORT PIERCE, FL 34950 Mailing Address

528 SOUTH U.S. 1

FORT PIERCE, FL 34950



01242008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0281045

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

			<u>.</u>			
DEIULIO, DANIEL M 528 SOUTH U.S. 1 FORT PIERCE, FL 34950			DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or re	gistered agent, or both	h, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and tate if applicable (NOTE. Registere			od Agent signature required when reinstating) DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	noing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS	j "	,	**	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEIULIO, DANIEL M. 528 SOUTH U.S. 1 FORT PIERCE, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				00000803208 02/08/08-80013-016 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,		NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 1	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ME REET ADDRESS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
42 I haraby	certify that the information conglige with this fil	ing does not qualify for the evi	omntione con	tained in Chapter 119	Florida Statutos I further certify that the information	

indicated on this report or 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 cath; 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.

DANISL M DEVLLO

1.28.03