

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # V72937 1. Entity Name BUYERS AID INC.	
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Principal Place of Business 6868 CALLE DE CORTEZ CT. NAVARRE, FL 32566-8924 US	Mailing Address P.O. BOX 5296 NAVARRE, FL 32566 US
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DO NOT WRITE IN THIS SPACE



07032007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3146964	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PARKER, DONALD R. 6868 CALLE DE CORTEZ COURT NAVARRE, FL 32566-8924	DO NOT WRITE IN THIS SPACE
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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)	DATE _____
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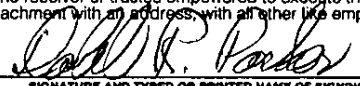
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVS PARKER, DONALD R 6868 CALLE DE CORTEZ NAVARRE, FL 325668909
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PARKER, DONALD R 6868 CALLE DE CORTEZ NAVARRE, FL 325668969
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/05/07-80007-012 150.00

**DO NOT WRITE
IN THIS SPACE**

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:  DONALD R. PARKER	7-3-07	256-825-R61
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #