


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 05, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # F03000003334 1. Entity Name CAMPUS AGENCY, INC.	
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Principal Place of Business % CATHY ALEXANDER 712 PRESIDENT STREET BROOKLYN, NY 11215	Mailing Address % CATHY ALEXANDER 712 PRESIDENT STREET BROOKLYN, NY 11215
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**DO NOT WRITE IN THIS SPACE**



01232008 No Chg-P CR2E034 (11/05)

4. FEI Number 34-0818608	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

MATTWAY, EMMA D  
5880 MIDNIGHT PASS RD #208  
SARASOTA, FL 34242-4107

**DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000816264  
02/14/08-80043-016 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	YSTC ALEXANDER, CATHY 712 PRESIDENT STREET BROOKLYN, NY 11215
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: X Cathy Alexander (CATHY ALEXANDER) 2/1/08 718-638-0140  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #