## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## FILED DOCUMENT # P02000051214 08 JUL 15 AH II: 52 INCORP SERVICES, INC. CONCIAN OF STATE Principal Place of Business Mailing Address 375 N. STEPHANIE STREET 375 N. STEPHANIE STREET **SUITE 1411 SUITE 1411** HENDERSON, NV 89014 HENDERSON, NV 89014 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07112008 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 54-2099800 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WF GREENBERG & COMPANY, LLC 17888 67TH COURT NORTH Street Address (P.O. Box Number is Not Acceptable) LOXAHATCHEE, FL 33470 City Zip Code FL 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. 000133268300 (NOTE Registered Agent signature required when rein with 6) 22/08 01014 009 \*\*61 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61,25 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Р TITLE Delete TITLE ■ Addition Change NAME ANSELL, DOUG P NAME SEDLACEK, TENNIE T STREET ADDRESS 375 N. STEPHANIE STREET, SUITE 1411 STREET ADDRESS 375 N. STEPHANIE STREE, SUIRE 1411 CITY-ST-ZIP HENDERSON, NV 89014 CITY-ST-ZIP HENDERSON, NV 89014 s TITLE ☐ Detete TITLE Change ■ Addition SEDLACEK, TENNIE \$ NAME NAME STREET ADDRESS 375 N. STEPHANIE STREET, SUITE 1411 STREET ADDRESS CITY-ST-ZIP HENDERSON, NV 89014 CITY-ST-ZIP TITLE ☐ Delete TILLE ☐ Change ☐ Addition SEDLACEK, TENNIE T NAME STREET ADDRESS 3155 E. PATRICK LANE, SUITE 1 STREET ADDRESS CITY-ST-ZIP LAS VEGAS, NV 89120 CITY-ST-ZIP TITLE Delete Change ☐ Addition ANSELL, DOUG D NAME NAMÉ SEDLACEK, TENNIE T STREET ADDRESS 375 N. STEPHANIE STREET, SUITE 1411 STREET ADDRESS 375 N. STEPHANIE STREE, SUIRE 1411 CITY-ST-ZIP HENDERSON, NV 89014 CITY-ST-ZIP HENDERSON, NV 89014 TITLE Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. ren Im SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Mouh 702-866-2500 Tennie Sedlacek, President July 11, 2008