## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 27, 2007 8:00 am Secretary of State

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Principal Place of Business Mailing Address 4012733U		
5411 GRAND BLVD SUITE 107 NEW PORT RICHEY, FL 34652  S411 GRAND BLVD SUITE 107 NEW PORT RICHEY, FL 34652	<b>1</b> 1 11 <b>112 1</b> 111 <b>1 (6</b> 11	<b>i</b> ir al ir el
2. Principal Place of Business - No P.O. Box # 3. Mailing Address		
Suite, Apt. #, etc.	34 (12/06)	
City & State City & State 4. FEI Number 20 - 8219715		olied For Applicable
	\$8.75 Addi Fee Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered A	gent	
Name		
SCHLYER, ARTHUR DR.  5411 GRAND BLVD SUITE 107  NEW PORT RICHEY, FL 34652  Street Address (P.O. Box Number is Not Acceptable)		
TALLY FORT MORELLITE 04002		
City	Zip Code	
<ol><li>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 I the obligations of registered agent.</li></ol>	amiliar with, a	and accept
SIGNATURE		
SIGNATURE Signature, lyped or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE		
Signature, lyped or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when reinstaling)  DATE  FILE NOW!!! FEE IS \$550.00  9. Election Campaign Financing \$5.00 May Be		·
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12. I hereby certify that the information supplied with this titing 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 occurate 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: OF SIGNING OFFICER OR DIRECTOR

727.847.1825

Daytime Phone #