	REPORT	,	1	Eab	25 20	
DOCUMENT # P96000038659 1. Entity Name			Feb 25, 2008 08: Secretary of S			
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Principal Place of Business 3443 GLENN HOLLOW CT JACKSONVILLE, FL 32226 US	Mailing Address 3443 GLENN HOLLOW CT JACKSONVILLE, FL 32226	US	 	INKO ANKI NATA KUILODIY	RAIRA WEI INID DII	4 - 1 44 - 1 4 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14
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DO NOT WRITE IN THIS S		CE	CO 75 Additional			Not Applicable
6. Name and Address of Current Re	wistened Agent	T.	5. Certificate	of Status Desired		equired
PANTIN. SEAN R 3443 GLENN HOLLOW CT JACKSONVILLE. FL 32226				NOT WI HIS SP		
 The above named entity submits this statement for the the obligations of registered agent. 	he purpose of changing its register	ed office or register	ed agent, or bol	n, in the State of Flor	ida. I am familia	ir with, and accept
SIGNATURE	<u> </u>					
Signature, typed or printed name of regestered agent and	Inte i applicable. (NOTE. Register	xi Agent signature required	Swhen renatabing)		DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			.00 May Be ed to Fees			
10. OFFICERS AND DI	RECTORS		, *	U0000	0838409	
NAME PANTIN, SEAN R STREET ADDRESS 3443 GLENN HOLLOW CT CITY-ST-ZIP JACKSONVILLE, FL 32226		· · · ·		03/05/08	8-80030-0	04 150.00
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TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS STREE	is filing does not qualify for the ex- ue and accurate and that my signa and to excount that my signa	emptions contained ture shall have the red by Chapter 607	IN 7	THIS SP	ACE	t the information officer or director k 10 or Block 11 if

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