

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024639

Entity Name: PHILI INC.

FILED
May 11, 2007
Secretary of State

Current Principal Place of Business:

18 SO. PARK AVE.
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

18 SO. PARK AVE.
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMARKOS, ANNA T
18 SO. PARK AVE
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SAMARKOS, ANNA T
Address: 18 SO. PARK AVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: VP/D () Delete
Name: KLONARIS, THEOPHILOS M
Address: 346 WESTWINDS DRIVE
City-St-Zip: PALM HARBOR, FL 34683 US

Title: T/D () Delete
Name: KLONARIS, MARIA T
Address: 346 WESTWINDS DRIVE
City-St-Zip: PALM HARBOR, FL 34683 US

Title: S () Delete
Name: SAMARKOS, JOHN T
Address: 18 SO. PARK AVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNA SAMARKOS

P/D

05/11/2007

Electronic Signature of Signing Officer or Director

Date