2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P99000026190

1. Entity Name
0500, INC.

Principal Place of Business	Mailing Address
12508 TOCCI LANE	12508 TOCCI LANE
RIVERVIEW, FL 33569	RIVERVIEW, FL 33569

DO NOT WRITE IN THIS SPACE

01222008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3564940	Not Applicable

5. Certificate of Status Desired ☐ - **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALLEN, PETER L
12508 TOCCI LANE
RIVERVIEW, FL 33569

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	9. Election Campaign Financing ☐ **$5.00** May Be Trust Fund Contribution. Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	ALLEN, PETER L
STREET ADDRESS	12508 TOCCI LANE
CITY-ST-ZIP	RIVERVIEW, FL 33569

TITLE	
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01/30/08-80035-013 150.00

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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: _Peter Allen_   1-24-08   8136713122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #