

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # 327659

1. Entity Name
CINFRE CORPORATION



Principal Place of Business

**614 DOWNS AVE
TEMPLE TERRACE, FL 33617**

Mailing Address

**614 DOWNS AVE
TEMPLE TERRACE, FL 33617**



04162008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1262500	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**XENICK, CYNTHIA
614 DOWNS AVENUE
TEMPLE TERRACE, FL 33617**

**DO NOT WRITE
IN THIS SPACE**

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME KLADIS, FREDA
STREET ADDRESS 434 RIVERHILLS DR
CITY-ST-ZIP TEMPLE TERRACE, FL 00000,

TITLE PD
NAME KALADIS, THEODORE
STREET ADDRESS 434 RIVERHILLS DR
CITY-ST-ZIP TEMPLE TERRACE, FL 00000,

TITLE D
NAME XENICK, CYNTHIA
STREET ADDRESS 614 DOWNS AVE
CITY-ST-ZIP TEMPLE TERRACE, FL 00000,

TITLE VD
NAME XENICK, GEORGE
STREET ADDRESS 614 DOWNS AVE
CITY-ST-ZIP TEMPLE TERRACE, FL 00000,

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000908524
05/06/08-80035-003.150.00

**DO NOT WRITE
IN THIS SPACE**

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 as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cynthia Xenick **Cynthia Xenick**

Date

Daytime Phone #

4-17-08