


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 08:00 A
Secretary of State

DOCUMENT # 542404
 1. Entity Name
 BULLIS BROMELIADS, INC.



Principal Place of Business 12420 S.W. 248TH ST. PRINCETON, FL 33032-5942	Mailing Address 12420 S.W. 248TH ST. PRINCETON, FL 33032-5942
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DO NOT WRITE IN THIS SPACE



01052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1759533	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HARVEY, BULLIS R III
 12420 S.W. 248TH ST.
 PRINCETON, FL 33032-5942

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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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BULLIS, HARVEY R III 12420 S.W. 248TH ST. PRINCETON, FL 330325942
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BULLIS, LOIS F 12420 S.W. 248TH ST. PRINCETON, FL 330325942
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BULLIS, PATRICIA G 12420 S.W. 248TH ST. PRINCETON, FL 330325942
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  HARVEY R. BULLIS III 1/8/07 305-258-8932

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