

**-2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 11, 2007 8:00 am**  
**Secretary of State**

09-11-2007 90006 020 \*\*\*550.00

DOCUMENT # F06000000560

1. Entity Name  
CONTEMPO PRODUCTS CORPORATION



Principal Place of Business

20507 TORRE DEL LAGO ST.  
ESTERO, FL. 33928

Mailing Address

20507 TORRE DEL LAGO ST.  
ESTERO, FL. 33928



07122007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

36-2771452

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

ONDRACEK, CLEMENT J  
20507 TORRE DEL LAGO ST.  
ESTERO, FL 33928

**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

*Clement J Ondracek*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/7/07

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE PC  
NAME ONDRACEK, CLEMENT J  
STREET ADDRESS 20507 TORRE DEL LAGO ST.  
CITY-ST-ZIP ESTERO, FL 33928

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

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

SIGNATURE:

*Clement J Ondracek*  
CLEMENT J. ONDRACEK, PRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/07

Date

Daytime Phone #