

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G36694

FILED  
Apr 07, 2011  
Secretary of State

**Entity Name:** FLORIDA BULLET INCORPORATED

**Current Principal Place of Business:**

1220 ROGERS STREET  
CLEARWATER, FL 337565903 US

**New Principal Place of Business:**

**Current Mailing Address:**

1220 ROGERS STREET  
287  
CLEARWATER, FL 337565903 US

**New Mailing Address:**

FEI Number: 59-2341725

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

FALONE, TOM, III  
1220 ROGERS STREET  
CLEARWATER, FL 337565903 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TOM FALONE, III  
Address: 1220 ROGERS STREET  
City-St-Zip: CLEARWATER, FL 337565903

Title: VP  
Name: FALONE, TOM  
Address: 1220 ROGERS STREET  
City-St-Zip: CLEARWATER, FL 337565903

I hereby 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 all other like empowered.

SIGNATURE: TOM FALONE III

P

04/07/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date