## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # L61047** 

(1)

BULTING	CK ENTERPRISES, INC.	•		I MENTIN DIE SING ALDER GERN GERN GERN	<del>Biril</del> Birin Biril Biril Biril Biril Ribil ion
l '	ce of Business	Mailing Address		1 10011011 010 01101 11011 00111 01011 1001	GLGII SIBII GIBII BIBII GIBII (GEL
9621 CRESCEN #202	IT LAKE DR	9629 CRECEMT :ALE DR #102			
NAPLES FL 33	942	NAPLES FL 33942			
US		US		3. Date Incorporated or Qualified	3a. Date of Last Report
				03/29/1990	05/01/1996
l '	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 240		$ \mathbf{z}_{6} $ $P.O.$ $Bc$	x 11452	59-3007903	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta		City & State	~,	6. Election Campaign Financing	\$5.00 May Be
23 NAC	oues fl.	28 NAPLES	FL.	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24 3410	· · · · · · · · · · · · · · · · · · ·		10		Yes No
DI K	9. Name and Address of Curren	r Hegistereo Agent	81 Name	10. Name and Address of New R	egistered Agent
	TINCK, STEFAAN				
9621 CRESCENT LAKE DR 82 Street Addres				Address (P.O. Box Number is Not Accepta	ble)
#20;	2 LES FL 33942		83	on barton ka	
NAP	LES FL 33942				
			84 City	PLES	FL 85 Zip Code 34102
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508. Florida Statutes	the shove named	cornoration submits this statement for the	nurnose of changing its registered
office or	registered agent, or both, in the State	of Florida. Such change was au	thorized by the corp	poration's board of directors. I hereby acce	ppl the appointment as registered
	an raminal with, and accept the obliga	iuons di, section bu7.uoub, Fion	da Sialules.		AL 14107
SIGNATURE	Stgoalare, typed or printed name of registered age	ic and title if applicable (NOTE	Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
10111	P	☐ DELETE	1.1 TITLE		Change Addition
RAME	BULTINCK, URBAIN		1.2 NAME	oob 10.0	
STREET ADDRESS	9621 CRESCENT LAKE DR		1.3 STREET ADDRESS	2400 Tarpon RD	
CITY - SI - ZIP	NAPLES FL 33942		14 CITY-ST-ZIP	Naples Fl. 31	1102
TILLE	D DIN TRACK SHIP	☐ DELETE	21 TITLE	•	Change Addition
NAME	BULTINCK, FILIP		2.2 NAME		,
STREET ADDRESS	9621 CRESCENT LAKE DR		2.3 STREET ADDRESS	2400 Taypon es	_
CITY - S1 - 7IP	NAPLES FL 33942	Driver	2.4 CITY-ST-ZIP	Naples FP. 34	
TITLE	D BACTOLE COMA	☐ DELETE	3.1 TITLE		Change Addition
NAME DEGES MORES	BAETSLE, ERNA 9621 CRESCENT LAKE DR		3.2 NAME	2400 Taroon	ed ,
STREEL ADDRESS	NAPLES FL 33942		3.3 STREET ADDRESS		(40)
City-S1-ZIP Titls	VP	DELETE	3.4. CITY - ST - ZIP	Notes H. 3	Change Addition
NAME	BULTIMCH, STEFAN	(") prefet	4.1 TITLE	BULTINCK STE	Coc of Control
NAME STREET ADDRESS	9621 CRESCENT LAKE DR		4, 2 NAME	2400 Tanpon	faan
CITY - ST - ZIP	NAPLES FL 33942		4.3 STREET ADDRESS		102
TITLE	IN DESCRIPTION	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Naples Fl. 34	Change Addition
NAME	,	- President	5.2 NAME		Fire sounds Fire Leadings
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZiP			5.4 CITY-ST-ZIP		
TILLE		☐ DELETE	6.1 TITLE		Change Addition
			I	•	The contract of the contract of

6.3 STREET ADDRESS 6.4 CITY - ST - 2IP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes of on an attachment with an accurate.