

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L92537

FILED
Mar 03, 2005
Secretary of State

Entity Name: PULLCO ENTERPRISES, INC.

Current Principal Place of Business:

9045 HICKORY CIRCLE
P.O. BOX 340052
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

9045 HICKORY CIRCLE
P.O. BOX 340052
TAMPA, FL 33694

New Mailing Address:

FEI Number: 59-3023890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PULLARA, JOHN M.
9045 HICKORY CIRCLE
TAMPA, FL 33615 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PULLARA, JOHN M.,
Address: 9045 HICKORY CIRCLE
City-St-Zip: TAMPA, FL 33615

Title: V () Delete
Name: PULLARA, VICKI A.,
Address: 9045 HICKORY CIRCLE
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN M. PULLARA

PRES

03/03/2005

Electronic Signature of Signing Officer or Director

_____ Date