

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # M93735
 1. Entity Name
FILCO/USA, INC.



Principal Place of Business: **4508 BAY TO BAY BLVD TAMPA FL 33629 US**
 Mailing Address: **4508 BAY TO BAY BLVD TAMPA FL 33629 US**



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State
 Zip Country

4. FEI Number **59-2903182**
 Applied For: Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
PATRIARCO, K. A
4508 BAY TO BAY BLVD
TAMPA FL 33629

7. Name and Address of New Registered Agent
 Name: _____
 Street Address (P.O. Box Number is Not Acceptable): _____
 Zip Code: **FL**

What exactly do we get for this \$1500 ???

8. The above named entity certifies that it is familiar with, and accepts the obligations of registration.
 SIGNATURE _____
Signature, typed

Florida. I am familiar with, and accept the obligations of registration.
 DATE _____

FILE NOW!!
After May 1, 2008
Make Check Payable to

K.A. Patriarco

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP*
VP	PATRIARCO	4508 BAY	TAMPA FL

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP*	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 01/30/08-80056-015 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *K.A. Patriarco* **1-22-8 813/902-0987**