


**FILED**  
**Apr 10, 2008 8:00 am**  
**Secretary of State**

04-10-2008 90027 050 \*\*\*150.00

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P00000110273</b>			
1. Entity Name <b>FENYO PROPERTIES, INC.</b>			
Principal Place of Business <b>2 SOUTH BISCAYNE BLVD. SUITE 2630 MIAMI, FL 33131</b>		Mailing Address <b>123 S.E. THIRD AVE #404 MIAMI, FL 33131</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>750 Third Circle</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>#106</b>	
City & State		City & State <b>Vero Beach, FL</b>	
Zip	Country	Zip	Country
<b>32962</b>	<b>US</b>	<b>32962</b>	<b>US</b>
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>AHAH, L.C. 750 THIRD CIRCLE, #106 VERO BEACH, FL 32962</b>		<b>Unlimited Source Marketing Company</b>	
		Street Address (P.O. Box Number is Not Acceptable)	
		<b>750 Third Circle, #106</b>	
		City <b>Vero Beach</b>	
		FL Zip Code <b>32962</b>	
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 <b>Christina Collins, President</b>		DATE <b>3/21/08</b>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
<b>FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FENYO, GYORGY <input type="checkbox"/> Delete VERECKE U 37 BUDAPEST HUNGARY, 1025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FENYO, GYORGYNE <input type="checkbox"/> Delete VERECKE U 37 BUDAPEST HUNGARY, 1025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COLLINS, CHRISTINA <input type="checkbox"/> Delete 750 THIRD CIRCLE #106 VERO BEACH, FL 32962	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <b>Georgy Fenyo, President</b>		DATE <b>3/21/08</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	