

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90018 029 ***158.75

DOCUMENT # P01000023538

1. Entity Name

ENRICOS UNLIMITED, INC.



Principal Place of Business

404 BRIARWOOD CIRCLE
PEMBROOK FL 33024

Mailing Address

404 BRIARWOOD CIRCLE
HOLLYWOOD FL 33024

2. Principal Place of Business

505-9th PLACE

Suite, Apt. #, etc.

3. Mailing Address

5055-9th PLACE

Suite, Apt. #, etc.

City & State

VERO BEACH FL

City & State

VERO BEACH FL

4. FEI Number

65-1082337

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PAPALE, ENRICO

404 BRIARWOOD CIR.
HOLLYWOOD FL 33024

5055-9th PLACE

VERO BEACH FL 32966

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature of officer or director of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be

Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME PAPALE, ENRICO
STREET ADDRESS 404 BRIARWOOD CIRCLE
CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME PAPALE, MIRIAM J
STREET ADDRESS 404 BRIARWOOD CIRCLE
CITY-ST-ZIP HOLLYWOOD FL 33024

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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: ENRICO PAPALE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-6-06 954-292-6691