

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P01000092830**

1. Entity Name:  
**ENVY PROMOTIONAL CORP.**



Principal Place of Business  
**111 SW 2ND AVE  
FT LAUDERDALE, FL 33301**

Mailing Address  
**111 SW 2ND AVE  
FT LAUDERDALE, FL 33301**



03072008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1141273**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**RUSSELL, ALAN  
111 SW 2ND AVE  
FT LAUDERDALE, FL 33301**

**DO NOT WRITE  
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$350.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**U000000915737  
05/09/08-80027-009 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	RUSSELL, ALAN
STREET ADDRESS	111 SW 2ND AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	DV
NAME	TASCIONE, MIKE
STREET ADDRESS	111 SW 2ND AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	SD
NAME	CORDARO, JAMES
STREET ADDRESS	111 SW 2ND AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JAMES CORDARO**

**3/13/08**

**954-522-0733**

Date

Daytime Phone #