2007 FOR PROFIT CORPORATION

Mar 21. 2007 08:00 AM te

ANNUAL REPORT							
DOCUMENT # P02000			S	ecretary o	f Sta		
ANNADALES ENTERPRISES (NC.				٠		
Principal Place of Business	Mailing Address						
1700 SW 32 CT. FT. LAUDERDALE, FL 33315	1700 SW 32 CT. FT. LAUDERDALE, FL 33315)((88(31 23881 1848) 4 8 8 8 (18		
DO NOT WRITE IN THIS SPA		CE	03052007	No Chg-P	CR2E034 (11/05)		
DO NOT WK	IIE IN INIS SPA	∕ l	4. FEI Numb 02-054			plied For (Applicable	
				of Status Desired	S8.75 Add Fee Require		
6. Name and Address of 0	Current Registered Agent						
LIVERPOOL, RUTH 4974 NORTH UNIVERSITY DRIVE LAUDERHILL, FL 33351			DO	NOT W	RITE		
		IN THIS SPACE					
) IIN	i mio or	ACE		
	\mathcal{N}_{0}		<u>/</u>		<u>,</u>		
The above named entity submits the state the obligations of registered agent	the for the ourpose of changing its register	ed office or register	red agent, or bo	th, in the State of Fl	orida. I am familiar with,	and accept	
SIGNATURE Sgrature word corried as not regist	ed Agent signature required when reinstating) OA OA						
FILE NOW!!! FEE IS \$150. After May 1, 2007 Fee will be	\$550.00 Trust Fund Contribution.		.00 May Be led to Fees	U0000 03/29/07	0674919 -80091-003 15	0.00	
10. OFFICE	RS AND DIRECTORS	1					
NAME RYSEDORPH, ANNA							
STREET ADDRESS 1700 SW 32 CT.							
TITLE VD		-					
NAME BULMAN, DALE STREET ADDRESS 1700 SW 32 CT.							
CITY ST-ZIP FT. LAUDERDALE, FL 33	3315	ļ					
TITLE							
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C(TY-ST-ZIP				NOT W			
TITLE NAME			IN .	THIS SI	PACE		
STREET ADDRESS							
CHY-ST-ZIP		4					
TITLE NAME							
SIREET ADDRESS CHY-SI-ZIP							
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12. Thereby 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 suppliemental 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:

TITLE NAME STREET ADDRESS CITY - ST - ZIP

HNNA RYSEDORPH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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