

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2007 8:00 am
Secretary of State

07-12-2007 90056 009 ***150.00

DOCUMENT # P02000033100			
1. Entity Name SUFFOLK ENTERPRISES, INC.			
Principal Place of Business 13635 EXOTICA LANE WELLINGTON, FL 33414		Mailing Address 13635 EXOTICA LANE WELLINGTON, FL 33414	
2. Principal Place of Business - No P.O. Box # 438 LEXINGTON AVE SW		3. Mailing Address 438 LEXINGTON AVE SW	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State VERO BEACH, FL		City & State VERO BEACH, FL	
Zip 32962		Zip 32962	
Country US		Country US	
4. FEI Number 01-0638257		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEYOND ACCOUNTING & BOOKKEEPING, INC. 33 SE 1ST AVENUE DELRAY BEACH, FL 33444		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1801 S. FEDERAL HWY, STE 218 City Delray Beach FL Zip Code 33483	
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 6-30-07 <small>Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD VANHARKEN, DONALD 13635 EXOTICA LANE WELLINGTON, FL 33414	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(ADDRESS ONLY) 438 LEXINGTON AVE SW VERO BEACH FL 32962
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEWART, JAYNE M 33 SE 1ST AVENUE DELRAY BEACH, FL 33444	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(ADDRESS ONLY) 1801 S. FEDERAL HWY STE 218 Delray Beach, FL 33483
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
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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:		6/30/07 772-473-3229 <small>Date Daytime Phone #</small>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			