2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 15, 2008 08:00 AN Secretary of State

DOCUMENT # P02000067787 1. Entity Name UTOPIA OF PRINCETON, INC.					,	secretar,	y ur su
Principal Place 4820 W. BROV PLANTATION,	NARD BLVD.	Aailing Address 4820 W. BROWARD BLVD. PLANTATION, FL 33317			Bana (1911 1811) Bani 1811) 1811	EBIA BIII IBBI JBIK	
		•					
				04062008 No Chg-P CR2E034 (11/05)			
D	O NOT WRITE I	CE	4. FEI Numb		<u> </u>	Applied For Not Applicable	
				5. Certificate	of Status Desired	□ \$8.75 A Fee Requ	
6. Name and Address of Current Registered Agent						•	
DAVIDOW, SOL 4820 W BROWARD BLVD. PLANTATION, FL 33317			, ,	IN .	NOT W THIS SP	ACE	
	named entity submits this statement for the ons of registered agent.	purpose of changing its register	ed office or regist	lered agent, or bo	ith, in the State of Flo	rida I am familiar wil	h, and accept
SIGNATURE							,
FILE After Ma	: NOWIII FEE IS \$150.00 y 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		5.00 May Be dded to Fees			•
10. OFFICERS AND DIRECTORS				•	U0000	00898869 8-80015-024	ima aa
NAME STREET ADDRESS	PD DAVIDOW, SOL 4820 W BROWARD BLVD PLANTATION, FL 33317		. ,		. 0472870	8-80015-024	150.00
NAME	STD DAVIDOW, ALICE 4820 W BROWARD BLVD PLANTATION, FL 33317					· .	
TOTLE							

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:

STREET ADDRESS

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4.10.08

DO NOT WRITE

IN THIS SPACE

954.530- ZL

Daytirne Phone #

Sol DAVIDOW

PORSIDANT