

FILED
Aug 12, 2005 8:00 am
Secretary of State

08-12-2005 90001 017 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000020101

1. Entity Name
FINPROP ENTERPRISES CORP.



Principal Place of Business
1951 LEE ST.
HOLLYWOOD, FL 33020

Mailing Address
P.O. BOX 460027
FORT LAUDERDALE, FL 33346

50061217



07012005 No Chg-P CR2E034 (10/03)

4. FEI Number
98-0392000

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WOLHUTER, KURT
1951 LEE ST.
HOLLYWOOD, FL 33020

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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

TITLE	D
NAME	HODOUL, VICTOR
STREET ADDRESS	4 MILKWOOD SANDS 52 BURNHAN DR
CITY-ST-ZIP	LA LUCIA NATALY, SO AFRICA,
TITLE	D
NAME	WOLHUTER, KURT
STREET ADDRESS	P.O. BOX 460027
CITY-ST-ZIP	FORT LAUDERDALE, FL 33346
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 exemption stated in Section 119.07(3)(i), 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: Kurt Wolhuter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/07/2005 754 873 1657
Date Daytime Phone #

ATTACHMENT

50061217
P03000020101

CHANGE OF ADDRESS

WOLHUTER, KURT
4911 SCHOONER DRIVE
DANIA BEACH, FL
33312.

NB: P.O. Box 460027, STAYS the SAME.

FEIN # 98-0392000
