

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000076823

Entity Name: BULE, INC.

**FILED**  
**Sep 04, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

1098 - 1102 NORMANDY DRIVE  
MIAMI BEACH, FL 33141

## **New Principal Place of Business:**

## **Current Mailing Address:**

3150 FLORIDA AVENUE  
COCONUT GROVE, FL 33133

## **New Mailing Address:**

9999-2 NW 9TH STREET CIRCLE  
MIAMI, FL 33172

FEI Number: 26-0828667

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

BUHOLZER, ISIDOR  
3150 FLORIDA AVENUE  
COCONUT GROVE, FL 33133 US

## **Name and Address of New Registered Agent:**

ARENAS, RODOLFO  
9999-2 NW 9TH STREET CIRCLE  
MIAMI, FL 33172 US

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.

SIGNATURE: RODOLFO ARENAS

09/04/2007

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BUHOLZER, ISIDOR  
Address: 3150 FLORIDA AVE  
City-St-Zip: COCONUT GROVE, FL 33133

Title: DV ( ) Delete  
Name: ROBLES, IRIS M  
Address: 530 ALMERIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: DST ( ) Delete  
Name: LEAL, FERNANDO R  
Address: 6090 SW 104 ST  
City-St-Zip: PINECREST, FL 33156

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: FRANCIA, TERESA  
Address: 9999-2 NW 9TH STREET CIRCLE  
City-St-Zip: MIAMI, FL 33172

Title: STD (X) Change ( ) Addition  
Name: GRECO, MARINA  
Address: 9999-2 NW 9TH STREET CIRCLE  
City-St-Zip: MIAMI, FL 33172

Title: PD (X) Change ( ) Addition  
Name: ARENAS, RODOLFO  
Address: 9999-2 NW 9TH STREET CIRCLE  
City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RODOLFO ARENAS

PD

09/04/2007

Electronic Signature of Signing Officer or Director

Date