

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

04-24-2006 90405 042 ****50.00
05-01-2006 90340 047 ***100.00

DOCUMENT # P03000121446	
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1. Entity Name
CELENA'S MANUFACTURING, INC.

Principal Place of Business 201 TARPON INDUSTRIAL DR #2 TARPON SPRINGS, FL 34689	Mailing Address 201 TARPON INDUSTRIAL DR #2 TARPON SPRINGS, FL 34689
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Paid
40072728
80



04272006 Chg-P CR2E034 (11/05)

2. Principal Place of Business		3. Mailing Address		4. FEI Number 20-0520891		Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
VANEE, JAMES 201 TARPON INDUSTRIAL DR #2 TARPON SPRINGS, FL 34689				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST WEPPL0, JAMES A 826 DODECANESE BLVD TARPON SPRINGS, FL 34689	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Weppl0, James A 826 Dodecanese Blvd Tarpon Springs FL 34689	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Van Ee, James M 408 Manor Blvd Palm Harbor FL 34683	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: *James A Weppl0*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

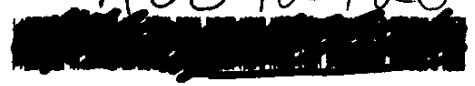
4/27/06
Date

727.945.1963
Daytime Phone #

2006 FOR PROFIT CORPORATION ANNUAL REPORT

120
CH# 2808
4/20/06
450-10

ATTACHMENT
40072728



04202006 Chg-P CR2E034 (11/05)

4. FEI Number 20-0520891	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.75 Additional Fee Required

DOCUMENT # P03000121446	
1. Entity Name CELENA'S MANUFACTURING, INC.	

Principal Place of Business 201 TARPON INDUSTRIAL DR #2 TARPON SPRINGS, FL 34689	Mailing Address 201 TARPON INDUSTRIAL DR #2 TARPON SPRINGS, FL 34689
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent VANEE, JAMES 201 TARPON INDUSTRIAL DR #2 TARPON SPRINGS, FL 34689

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____
Signature, name or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NUMBER FEE IS \$150.00 After May 1, 2006 Fee will be \$250.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete DPST WEPPL0, JAMES A 824 DODECANESE BLVD TARPON SPRINGS, FL 34689
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition DP Weppl0, James A 824 Dodecanese Blvd Tarp0n SprIng, FL 34689
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition ST VaneE, James 408 Manor Blvd Palm Harbor, FL 34683
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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SIGNATURE: James A Weppl0 4/20/06 7279411943
Signature must be typed on printed name of officer or director Date Daytime Phone