

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90497 011 ***150.00

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04202005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000025169 1. Entity Name BUNAG, INC.																																																																																																																																																											
Principal Place of Business 16830 WHIRLEY RD LUTZ, FL 33558				Mailing Address 16830 WHIRLEY RD LUTZ, FL 33558																																																																																																																																																							
2. Principal Place of Business 12312 N. OREGON AVE		3. Mailing Address 12312 N. OREGON AVE		4. FEI Number 90-0142914 Applied For ☐ Not Applicable ☐ 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																																																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																																									
City & State TAMPA, FL		City & State TAMPA, FL																																																																																																																																																									
Zip 33612		Zip 33612																																																																																																																																																									
Country HILLSBOROUGH		Country HILLSBOROUGH		6. Name and Address of Current Registered Agent BUNAG, ANGELA M 16830 WHIRLEY RD LUTZ, FL 33558 12312 N. OREGON AVE TAMPA, FL 33612																																																																																																																																																							
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		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, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;">☒ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>BUNAG, ANGELA M</td> <td></td> <td>STREET ADDRESS</td> <td>12312 N. OREGON AVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>16830 WHIRLEY RD</td> <td></td> <td>CITY-ST-ZIP</td> <td>TAMPA, FL 33612</td> <td></td> </tr> <tr> <td></td> <td>LUTZ, FL 33558</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>ST</td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☒ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>BUNAG, JONATHAN N</td> <td></td> <td>NAME</td> <td>12312 N. OREGON AVE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>16830 WHIRLEY RD</td> <td></td> <td>STREET ADDRESS</td> <td>TAMPA, FL 33612</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LUTZ, FL 33558</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☒ Change ☐ Addition	STREET ADDRESS	BUNAG, ANGELA M		STREET ADDRESS	12312 N. OREGON AVE		CITY-ST-ZIP	16830 WHIRLEY RD		CITY-ST-ZIP	TAMPA, FL 33612			LUTZ, FL 33558					TITLE	ST	☐ Delete	TITLE		☒ Change ☐ Addition	NAME	BUNAG, JONATHAN N		NAME	12312 N. OREGON AVE		STREET ADDRESS	16830 WHIRLEY RD		STREET ADDRESS	TAMPA, FL 33612		CITY-ST-ZIP	LUTZ, FL 33558		CITY-ST-ZIP									TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP									TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																																																											

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