2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000040489

1. Entity Name
VILLABATE ENTERPRISES, INC.



FILED Mar 15, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

7183 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437 7183 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437



CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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4.	FEI Number		Applied For
	20-0830360	[Not Applicable
5.	Certificate of Status Desired		5 Additionat equired

6. Name and Address of Current Registered Agent

TUMMINIA, SANTA 7183 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437

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No Chg-P

02212007

	named entity submits this statement for the plant for the plant of registered agent.	urpose of changing its register	ed office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and ac	cept
SIGNATURE_						
OIGINATORICE	Signature, typed or printed name of registered agent and title if	applicable (NOTE Registere	d Agent signature	required when reinstating)	- DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE	D		ì			
NAME	TUMMINIA, SANTA					
STREET ADDRESS	7183 BRUNSWICK CIRCLE					
CITY-SI-ZIP	BOYNTON BEACH, FL 33437					
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NAME					U00000666671	
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12. I hereby c	ertify that the information supplied with this fill	ing does not qualify for the exe	emptions con	tained in Chapter 119	, Florida Statutes. I further certify that the information	on I
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12. I nereby certify that the information supplied with this filling does not quality 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 eath; 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

3/13/07 56/7334727

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