## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 03, 2008 08:00 A Secretary of State DOCUMENT # P04000040489 VILLABATE ENTERPRISES, INC. Mailing Address Principal Place of Business 7183 BRUNSWICK CIRCLE 7183 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437 BOYNTON BEACH, FL 33437 No Chg-P CR2E034 (11/05) 02122008 DO NOT WRITE IN THIS SPACE Applied For FEI Number 20-0830360 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TUMMINIA, SANTA DO NOT WRITE 7183 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437 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, typed or printed name of registered agent and title if applicable err (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. . After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITI F TUMMINIA, SANTA NAME STREET ADDRESS 7183 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437 CITY+ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. Thereby 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:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**