

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

08 APR 10 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000129012



1. Entity Name
ATTILA TREND INTERNATIONAL CORPORATION

Principal Place of Business
18205 BARUCH DRIVE
FT MYERS, FL 33967

Mailing Address
18205 BARUCH DRIVE
FT MYERS, FL 33967

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03252008

Chg-P

CR2E034 (12/06)

4. FEI Number

56-2498870

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARKO, BELA
18205 BARUCH DR
FORT MYERS, FL 33912-6492

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
BARKO, BELA
18205 BARUCH DR
FORT MYERS, FL 33967 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
NEHEZ, IMRE
KORORO UT 16
PAPA, HUNGARY, 8500 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BARKO, ATTILA
18205 BARUCH DR
FORT MYERS, FL 33967 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFOA
BARKO, BELA
18205 BARUCH DR
FT. MYERS, FL 33967 ☐ 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 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
200123496332
04/15/08--01003--019 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
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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:

Attila Trend

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April - 1 - 2008

Date

Daytime Phone #

KS