


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90130 004 ***150.00

DOCUMENT # P05000042068 1. Entity Name FULOP ENTERPRISES, INC.					
Principal Place of Business 4022 WEST CORONA STREET TAMPA, FL 33629 US			Mailing Address 4022 WEST CORONA STREET TAMPA, FL 33629 US		
2. Principal Place of Business - No P.O. Box # 3656 KALANCHOE PLACE		3. Mailing Address SMALL			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State WESLEY CHAPEL, FL		City & State 		4. FEI Number 20-2568866	
Zip 33544		Country US		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent GRIFFITH, JEFFREY D 433 SECOND STREET SOUTH B SAFETY HARBOR, FL 34695			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D FULOP, JEFFREY <input type="checkbox"/> Delete 4022 WEST CORONA STREET TAMPA, FL 33629		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3656 KALANCHOE PLACE WESLEY CHAPEL, FL 33544	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FULOP, CARRIE L <input type="checkbox"/> Delete 4022 WEST CORONA STREET TAMPA, FL 33629		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3656 KALANCHOE PLACE WESLEY CHAPEL, FL 33544	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u><i>Jeffrey Fulop</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			X 04/30/08 <small>Date</small>		
<small>Daytime Phone #</small>					