

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 26, 2007 08:00 AM
Secretary of State**

DOCUMENT # P05000059451

1. Entity Name
KUNDRAT HOMES, INC.



Principal Place of Business
**11367 NEWINGTON AVE
SPRING HILL, FL 34609**

Mailing Address
**11367 NEWINGTON AVE.
SPRING HILL, FL 34609**



03092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|------------------------------------|--|
| 4. FEI Number 20-3679290 | Applied For <input type="checkbox"/> |
| | Not Applicable <input type="checkbox"/> |

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**KUNDRAT, MARK
11367 NEWINGTON AVE.
SPRING HILL, FL 34609**

**DO NOT WRITE
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 _____

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, 2007 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 | P KUNDRAT, MARK 11367 NEWINGTON AVE. SPRING HILL, FL 34609 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V COLUMBINO, ANDREW 13541 RUDI LOOP SPRING HILL, FL 34609 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
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**DO NOT WRITE
IN THIS SPACE**

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: _____

Mark Kundrat

3-13-07 (352)684-2283

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #