2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000124633

City-St-Zip:

CLEARWATER, FL 33764

Entity Name: REAUME ENTERPRISES INC

FILED May 07, 2007 Secretary of State

y	THE THE TOWN	E ENTERN MOLO INC.			
Current P	rincipal Place	e of Business:	New Principal Plac	New Principal Place of Business:	
2725 VIA CIPRIANI #710B CLEARWATER, FL 33764				5125 17TH AVENUE NORTH SAINT PETERSBURG, FL 33710	
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
2725 VIA CIPRIANI #710B CLEARWATER, FL 33764			PO BOX 48711 SAINT PETERSBU	PO BOX 48711 SAINT PETERSBURG, FL 33743	
FEI Number:	: 20-4947940	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
5125 17TF	ALEXANDER I AVENUE NO TERSBURG, I	ORTH			
	named entity e of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution ().	ot receive the prior notice.		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	REAUME, ALE 5125 17TH AV		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X REAUME, JAN 2725 VIA CIPR CLEARWATER	RIANI #710B	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP (X REAUME, JAW 2725 VIA CIPR		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ALEXANDER REAUME P 05/07/2007