

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000001120

Entity Name: VILTE, INC.

FILED
Mar 11, 2007
Secretary of State

Current Principal Place of Business:

2620 WILD PINES LANE 429
NAPLES, FL 341124739

New Principal Place of Business:

Current Mailing Address:

2620 WILD PINES LANE 429
NAPLES, FL 341124739

New Mailing Address:

PO BOX 7842
NAPLES, FL 34101-784

FEI Number: 20-4242291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAJUS, AREK
4699 N FEDERAL HWY
POMPANO, FL 33064 US

Name and Address of New Registered Agent:

ZELVIENE, RUTA
2620 WILD PINES LANE 429
NAPLES, FL 341124739 US

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.

SIGNATURE: RUTA ZELVENE

03/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZELVIENE, RUTA
Address: 2620 WILD PINES LANE 429
City-St-Zip: NAPLES, FL 341124739

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: RUTA ZELVENE

P

03/11/2007

Electronic Signature of Signing Officer or Director

Date