200% FOR PROFIT CORPORATION **ANNUAL REPORT (AR)** 

## May 23, 2007 8:00 am Secretary of State DOCUMENT # P06000002997 04-30-2007 90388 021 \*\*\*150.00 1. Entity Name RULAU ENTERPRISES, INC. Principal Place of Business Mairing Address 8319 PINE TREE LN 8319 PINE TREE LN LAKE CHARKE SHORES FL 33406 LAKE CHARKE SHORES FL 33406 Principal Place of Business - No P.O. Box # 4599 BONAN ZA 3. Mailing Address 4599 BONOWZA Rd. SUILC. Apr. # OIC. Suite, Apl. #, otc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Number Applied For 20-4900478 LAKE WONTH Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent OLEA, JOHN ESQ LAW OFFICES OF JOHN OLEA PA 11382 PROSPERITY FRAMS RD - STE 228 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33410 City 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, 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and lipe it applicable (NOTE: Registeres Agent signature registes when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May 8e After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 tiller □ Delete 1071.6 ☐ Change Russell A. Rucan 4579 BONANZA Rd RULAU, RUSSELL A NAME NAME 8319 PINE TREE LN STREET ADDRESS STREET ADDRESS LAKE WONTH, FLA 33467 LAKE CHARKE SHORES FL 33406 CHY-ST-ZIP CHY-S1-ZIP 1101 ☐ Delete 1000 ☐ Change ☐ Addition RULAN, ALICE V. 4599 BONANZA Rd RULAU, ALICELL V HAME NAME 8319 PINE TREE LN STREET ADDRESS STRUET ADDRESS LAKE CHARKE SHORES FL 33406 33467 CITY-ST-77P CIFY-SI-ZIP LAKE WORTH. TITLE HILE Derete ☐ Change ☐ Addition MOST NAME STREET LADDRESS STREET ADDRESS CITY SI ZIO CHY-C1-212\_ MALE ☐ Delete TITLE ☐ Change ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CHY- S1-7(P CHY-SI- AP ☐ Defete HR ☐ Change Addition NAM NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIE City St-7/P nut Delete THEFT: ☐ Change ☐ Add/filon NAME NAME STREET ADDRESS SIRECT ADDRESS CITY-SI-7P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.19, 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 eath; that I am an officer or director of the corporation or the receiver or trusted ampowered 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. Russell A. Ruhre 4-20-07 5612534850 Decrease - Date - Doctore - Do SIGNATURE://