

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075615

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: MATUS ENTERPRISES, INC.

**Current Principal Place of Business:**

830 FLORIDA AVE  
COCOA, FL 32922 US

**New Principal Place of Business:**

**Current Mailing Address:**

830 FLORIDA AVE  
COCOA, FL 32922 US

**New Mailing Address:**

FEI Number: 20-4982267      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALWAYS BY THE NUMBERS INC  
350 TANGERINE AVE  
SUITE 1  
MERRITT ISLAND, FL 32953 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MATUS, ROBERTO  
Address: 830 FLORIDA AVE  
City-St-Zip: COCOA, FL 32922 US

Title: VP,T ( ) Delete  
Name: MATUS, CYNTHIA  
Address: 830 FLORIDA AVE  
City-St-Zip: COCOA, FL 32922 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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.

SIGNATURE: ROBERTO T. MATUS

PRES

04/28/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date