## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 24, 2008 08:00 AN DOCUMENT # P06000093895 Secretary of State 1. Entity Name NEW ENGLAND COLOURS INC. Principal Place of Business Mailing Address 27091 MATHESON AVE #205. 27091 MATHESON AVE #205 a BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135 01192008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5237619 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SHECRALLAL, NEIL T DO NOT WRITE 27091 MATHESON AVE #205 BONITA SPRINGS, FL 34135 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS running to a series and seleption in the city mleg. ........P. NAME SHERALLAH, NEIL T ासका अनुसार काला । वस्तु STREET ADDRESS 27091 MATHESON AVE #205 CITY-ST-ZIP BONITA SPRINGS, FL 34135 U00000794738 THE ومنفوا بالم 01/28/08-80019-024 150.00 NAME. 🕰 संबर्ध 🚉 STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY+SI-7P 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.

FILED