2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2008 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of Sta			
DOCU	MENT # P930000736	35			3	ecretar	y oi Sta
1. Entity Nam	ne FEC ENTERPRISES, INC.						
1 / / / / /	LO LIVILIA MOLO, INO.						
Principal Plac	ce of Business	Mailing Address	New Property and the second				
943 BOLENI	DER DR	943 BOLENDER DR					
DELRAY BEA	ACH, FL 33483	DELRAY BEACH, FL 33483					
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	O NOT WRITE	IN THIS SPA	CE	4. FEI Numbe	er	·	Applied For
Assets to the	and the state of t		tan ta tan tan ta	65-044	7792		Not Applicable
			the second second	5. Certificate	of Status Desired	□ \$8.7	5 Additional equired
	6. Name and Address of Current Re	gistered Agent		rit da in			
	O, LEONARD		144	- no	NOT W	RITE	e e de parella
	NDER DR BEACH, FL 33483		i ingara si pata	1 11		7 7 7 7 9 7 7	e bare and
		o r		; IN I	THIS SP	ACE	
					alita da salah	**************************************	ath and a special of the
8. The above	named entity submits this statement for the titions of registered agent.	ne purpose of changing its register	ed office or register	ed agent, or bot	th, in the State of Flo	rida. I am familiar	with, and accept
SIGNATURE.	, , ,						
OIGHATORE.	Signature, typed or printed name of registered agent and	title if epplicable. (NOTE: Registere	d Agent signature required	when reinstating)	Honore	DATE	
İ							
FIL	E NOW!!! FEE IS \$150.00	9. Election Campaign Finar		00 May Be	200000	 828148 	150.00
	.E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00			00 May Be ed to Fees	200000		150.00
After M	ay 1, 2008 Fee will be \$550.00 OFFICERS AND D	Trust Fund Contribution.		00 May Be ed to Fees	200000		150.00
After M	OFFICERS AND DI	Trust Fund Contribution.		00 May Be ed to Fees	200000		150.00
10. IIILE NAME STREET ADDRESS	OFFICERS AND DI P DEANGELO, LEONARD 943 BOLENDER DR	Trust Fund Contribution.		00 May Be ed to Fees	200000		150.00
10. IIILE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI P DEANGELO, LEONARD	Trust Fund Contribution.		00 May Be ed to Fees	200000		150.00
10. IIILE NAME STREET ADDRESS	OFFICERS AND DI P DEANGELO, LEONARD 943 BOLENDER DR	Trust Fund Contribution.		00 May Be ed to Fees	200000		150.00
10. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DI P DEANGELO, LEONARD 943 BOLENDER DR	Trust Fund Contribution.		ad to Fees	02/22/08-	80018-018	
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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 affect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this sport 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 appears, with all other the proposered.

SIGNATURE: _

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytine Phone #