2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # P94000003192

1. Entity Name
FILCON CORP

Principal Place of Business
7996 BEAUMONT COURT
NAPLES, FL 34109 US

Mailing Address
C/O GEROLD KNAUERHASE
483 ECHO CIRCLE
MARCO ISLAND, FL 34145

02032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0544918

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MAGURA, GUENTHER
7996 BEAUMONT COURT
NAPLES, FL 34109

DO NOT WRITE 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 _____

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

U00000844353
03/12/08-80033-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MAGURA, GUENTHER
STREET ADDRESS	7996 BEAUMONT COURT
CITY-ST-ZIP	NAPLES FL 34109
TITLE	V
NAME	MAGURA, PATRICIA
STREET ADDRESS	7996 BEAUMONT COURT
CITY-ST-ZIP	NAPLES FL 34109
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not violate the exemption 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.

SIGNATURE: KP Magura 2/27/08 239-394-8774
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

PATRICIA MAGURA