## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jan 18, 2007 8:00 am **Secretary of State** DOCUMENT # P95000027893 01-18-2007 90092 014 \*\*\*150.00 1. Entity Name TREND DEVELOPMENT ENTERPRISES, INC. Principal Place of Business Mailing Address **2612 MONTEEITO AVE** PO BOX 1347 EUSTIS, FL 32726 EUSTIS, FL 32727 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3309459 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired ["] Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CARUSO, PAUL 2612 MONTECITO AVENUE Street Address (P.O. Box Number is Not Acceptable) EUSTIS, FL 32726 City Zip Code 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) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D TOTAL ☐ Delete TITLE ☐ Addition Change CARUSO, PAUL NAME NAME STREET ADDRESS 2612 MONTECITO AVENUE STREET ADDRESS CITY-ST-ZIP EUSTIS, FL 32726 CITY-ST-ZIP TITLE ☐ Delete THEF Change ■ Addition Michael Holland NAME HOLLAND, MICHAEL NAME STREET ADDRESS PO BOX 895338 908, Newman STREET ADDRESS LEESBURG, FL 34789 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME CARUSO, CYNTHIA STREET ADDRESS 2612 MONTECITO AVENUE STREET ADDRESS CITY-ST-ZIP EUSTIS, FL 32726 CITY-ST-ZIP TITLE ☐ Delete ☐ Change C Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

FILED