2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2008 08:00 AN Secretary of State

DOCUMENT #	£P97000053606
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1. Entity Name THE DUDE COMPANY



Principal Place of Business

970 N. CONGRESS AVENUE

SUITE C

WEST PALM BEACH, FL 33409

Mailing Address

970 N. CONGRESS AVENUE

SUITE C

DO NOT WRITE IN THIS SPACE

WEST PALM BEACH, FL 33409



04212008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0773750

Applied For Not Applicable

5. Certificate of Status Desired

M

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent			<u> </u>	. ,		
DUDE, HARALD 970 N. CONGRESS AVENUE SUITE C WEST PALM BEACH, FL 33409		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						
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE .						
	E NOW!!! FEE IS \$150.00 ny 1, 2008 Fee will be \$550.00	9. Election Campaign Financia Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	U00000938340 05/27/08-80084-018 158.75	
10.	OFFICERS AND DIRECT	TORS		· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS C11Y-S1-ZIP	D DUDE, HARALD 1450 ENCLAVE CIR WEST PALM BEACH, FL 33411	·	•			
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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 eport 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 trystee employered 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR