2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000007043

1. Entity Name SUSI ENTERPRISES, INC.



FILED Jan 28, 2008 08:00 AN Secretary of State

Principal Place of Business

7806 CHARNEY LANE BOCA RATON, FL 33496 Mailing Address

7806 CHARNEY LANE BOCA RATON, FL 33496



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01242008 No Chg-P

Applied For 4. FEI Number 65-0831977 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

SUSI, SAMUEL 7806 CHARNEY LANE BOCA RATON, FL 33496

SIGNATURE:

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 tritle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	1		•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SUSI, SAMUEL 7806 CHARNEY LANE BOCA RATON, FL 33496				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000799768 01/30/08-80082-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					,
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR