

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90038 019 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

EP DVNF OUI\$ P98000088208 2/ Entity Name PHILENA CORPORATION	
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Principal Place of Business 3749TF2: U IEM DBQDPSEMQM44: 15	Mailing Address 2328IF7DBQDPSEMQXZ:TMUP2: 3 DBQDPSEMQM44: 15
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40096908



04192007 OpID: h.Q DS3F145122016*

5/ FEI Number 65-0901513	Applied For Not Applicable
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6/ Certificate of Status Desired ☐	%8/86 Beejupobm Gf fSI r vj f e
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7/ On f [boefBeef f t tpgDva/ ouSf hjt d f eIBh/ ou WRIGHT, CHRISTINE F 1105 CAPE CORAL PARKWAY EAST SUITE C CAPE CORAL, FL 33904

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9/ 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.

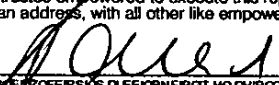
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	1/ Election Campaign Financing Trust Fund Contribution. ☐	%8/11 NbzICf I Beef etptGf f t
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21/ OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAMSCH, EVA 2638 S.E. 19TH AVENUE CAPE CORAL, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAMSCH, HANS-HERMANN 2638 S.E. 19TH AVENUE CAPE CORAL, FL 33904
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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23/ 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.

T.HOBUSF:		04-15-07	Date	Daytime Phone #
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