## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

**DOCUMENT # P99000078033** 

TUKO ENTERPRISES, CORP.



FILED Feb 05, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

13940 LAKE MAHOGANY BLVD # 1114 FORT MYERS, FL 33907

13940 LAKE MAHOGANY BLVD # 1114 FORT MYERS, FL 33907



## DO NOT WRITE IN THIS SPACE

01112008 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 65-0761973 Not Applicable \$8.75 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

TUMM, JENS 13940 LAKE MAHOGANY BLVD # 1114 FORT MYERS, FL 33907

the obligations of registered agent.

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

01-11-2008 233-848-5255

SIGNATURE	Signature, typed or printed name of registered agent and title if a	pplicable. (NOTE Registered	Agent signature	required when reinstating)	DATE	•
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financ     Trust Fund Contribution.	ing ,	\$5.00 May Be Added to Fees	U00000816172 02/14/08-80039-002	150.00
10.	OFFICERS AND DIRECT	ORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TUMM, JENS 13940 LAKE MAHOGANY BLVD #111 FORT MYERS, FL 33907	4				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:	IN <sup>*</sup>	THIS SPACE	
TITLE NAME STREET ADDRESS			,			
CITY-ST-ZIP	जर की होता से स्वाहर है।	BUTCHERS OF M	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The Contract of		
NAME STREET ADDRESS CITY-ST-ZIP		that is a second of the second		the second secon		
12. I hereby certify that the information supplied with this filling 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.						

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