

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 02, 2008 8:00 am
Secretary of State

06-02-2008 90008 040 ***150.00

DOCUMENT # S82456

1. Entity Name
SINGER ENTERPRISES, INC.



401012004

Principal Place of Business

Mailing Address

~~2207 WILSON STREET~~
1802 N. 22 AVE
HOLLYWOOD, FL 33020

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1802 N. 22 AVE
HOLLYWOOD, FL 33020



DO NOT WRITE IN THIS SPACE

04292008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0288796

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SINGER, BRUCE
~~2207 WILSON STREET~~
1802 N. 22 AVE
HOLLYWOOD, FL 33020

**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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	SINGER, BRUCE
STREET ADDRESS	2207 WILSON STREET 1802 N. 22 AVE
CITY-ST-ZIP	HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #