

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2008 APR 29 PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # G78178**

1 Entity Name  
FILINGS, INC.



Principal Place of Business  
3732 N.W. 16TH ST.  
FT. LAUDERDALE, FL 33311-4132

Mailing Address  
3732 N.W. 16TH ST.  
FT. LAUDERDALE, FL 33311-4132



04142008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-2517007</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

HEYMAN, L  
3732 N.W. 16TH ST.  
FT. LAUDERDALE, FL 33311

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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	DP
NAME	HEYMAN, LESLIE
REGISTERED ADDRESS	3732 N.W. 16TH ST.
CITY-STATE-ZIP	FT. LAUDERDALE, FL 33311
TITLE	V
NAME	HAYDEN, ROBERT
REGISTERED ADDRESS	3732 NW 16TH ST.
CITY-STATE-ZIP	FL. LAUDERDALE, FL 33311
TITLE	VP/D
NAME	HEYMAN, BONNIE
REGISTERED ADDRESS	3732 NW 16TH ST
CITY-STATE-ZIP	FORT LAUDERDALE, FL 33311
TITLE	VP
NAME	ROMAN, TERESA
REGISTERED ADDRESS	3732 NW 16TH ST.
CITY-STATE-ZIP	FORT LAUDERDALE, FL 33311
TITLE	
NAME	
REGISTERED ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
REGISTERED ADDRESS	
CITY-STATE-ZIP	

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04/30/08--01002--019 \*\*150.00

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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 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:** \_\_\_\_\_ *Leslie Heyman* \_\_\_\_\_ *Robert Hayden* \_\_\_\_\_ *Bonnie Heyman* \_\_\_\_\_ *Teresa Roman* \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #