2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 18, 2007 08:00 AM **DOCUMENT # K38052 Secretary of State** 1. Entity Name WINNIE & CELINA, INC. Principal Place of Business Mailing Address 2035-2037 HOLLYWOOD BLVD. 2035-2037 HOLLYWOOD BLVD. HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 01122007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0075227 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TERMINELLO, LOUIS J DO NOT WRITE TERMINELLO & TERMINELLO, P.A. 2700 S.W. 37TH AVE. IN THIS SPACE MIAMI, FL 33133 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. 1 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) U00000591204 **\$5.00** May Be 9. Election Campaign Financing 01/19/07-80014-001 150.00 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS VTD TITLE NAME MCCARTHY, SUE ANN STREET ADDRESS 2035-37 HOLLYWOOD BLVD. CITY-ST-ZIP HOLLYWOOD, FL 33020 **PSD** TITLE MCARTHY, ROBERT NAME STREET ADDRESS 4301 SW 33 STREET CITY-ST-ZIP HOLLYWOOD, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NATURE AND TYPED OR PENTED NAME OF SIGNING OFFICER OR DIRECTO

Daytime Ph

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