


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 A
Secretary of State


DOCUMENT # P05000053514

1. Entity Name
 MICHAEL S. KELLEHER, INC.



Principal Place of Business 400 SE 6TH AVENUE POMPANO BEACH, FL 33060 US	Mailing Address 400 SE 6TH AVENUE POMPANO BEACH, FL 33060 US
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04252007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2659812	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KELLEHER, MICHAEL S
 400 SE 6TH AVENUE
 POMPANO BEACH, FL 33060

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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: *Michael S Kelleher* DATE: 4/25/07

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000742890
 05/15/07-80087-009 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST KELLEHER, MICHAEL S 400 SE 6TH AVENUE POMPANO BEACH, FL 33060
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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: *Michael S Kelleher* DATE: 4/25/07 DAYTIME PHONE #: 9548227090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR