


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 08:00 AM
Secretary of State

DOCUMENT # F45325 1. Entity Name MICHIS ARTS & CRAFTS, INC.	
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Principal Place of Business 775 S. ENTRADA DR FORT MYERS, FL 33919 US	Mailing Address 775 S. ENTRADA DR UNIT 101 FORT MYERS, FL 33919 US
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DO NOT WRITE IN THIS SPACE



02012007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2126203	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

LEGER, MICHIO F PRES.
775 S. ENTRADA DRIVE
FORT MYERS, FL 33919

**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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST LEGER, MICHIO F. 15091 S TAMiami TRAIL UNIT 101 FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LEGER, LEE H., JR. 15091 S TAMiami TRAIL UNIT 101 FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEGER, MICHIO F. 15091 S TAMiami TRAIL FORT MYERS, FL 33908
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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: Michele F Leger, President 2/14/07 (239) 81-2692
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #