


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90200 018 ***150.00

DOCUMENT # F97000001491 1. Entity Name FLIK INTERNATIONAL CORP.					
Principal Place of Business 3 INTERNATIONAL DR 2ND FLOOR RYE BROOK NY 10573				Mailing Address 2400 YORKMONT ROAD ATTN: TAX DEPARTMENT CHARLOTTE NC 28217	
2. Principal Place of Business - No P.O. Box # 3 International Dr.		3. Mailing Address 2400 Yorkmont Road			
Suite, Apt. #, etc. 2nd Floor		Suite, Apt. #, etc. 6 Tax Dept			
City & State Rye Brook NY		City & State Charlotte NC			
Zip 10573		Zip 28217		Country USA	
Country USA		4. FEI Number 13-2814803			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State </div> <div style="width: 60%;"> 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees </div> </div>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO RICK POSTIGLIONE 2400 YORKMONT ROAD CHARLOTTE NC 28217 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVPD ORDROF, THOMAS G 2400 YORKMONT RD CHARLOTTE NC 28217 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS ROSSITCH, RICHARD J 2400 YORKMONT RD CHARLOTTE NC 28217 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DAVIS, SCOTT 2400 YORKMONT ROAD CHARLOTTE NC 28217 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS DEBORAH K DELANO 2400 YORKMONT ROAD CHARLOTTE NC 28217 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVPS C. PHILLIP WELLS 2400 YORKMONT ROAD CHARLOTTE NC 28217 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>C. Phillip Wells</u> <u>C. Phillip Wells 4/17/07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					



1st MOORE CR2E034 (10/06)

FL

ATTACHMENT

40083009

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FLIK INTERNATIONAL CORP.

Corporate Data Sheet

Corporation Name: Flik International Corp.
Address: Three International Drive, Second Floor
Rye Brook, NY 10573
FEIN Number: 13-2814803

Flik International Corp.

Officers:

<u>Name</u>	<u>Office</u>
Rick Postiglione	Chief Executive Officer
*Scott Davis	President
*Thomas G. Ondrof	Executive Vice President
C. Phillip Wells	Senior Vice President, General Counsel & Secretary
Adrian Merideth	Chief Financial Officer
Kristin E. Briotte	Assistant Secretary
Deborah K. Delano	Assistant Secretary -Tax
Richard J. Rossitch	Assistant Secretary
Nicole Tharrington	Assistant Secretary
Laurence B. Jones	Assistant Secretary

Directors:

Thomas G. Ondrof
Antony G. Shearer
C. Phillip Wells