



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

4/1

FILED
May 01, 2007 8:00 am
Secretary of State

04-11-2007 90013 002 ***150.00

DOCUMENT # J42221 1. Entity Name MARIE M. MIMI STRAUB, P.A.			
Principal Place of Business 4784 WEST BLVD. NAPLES, FL 34103 US		Mailing Address 4784 WEST BLVD. NAPLES, FL 34103 US	
DO NOT WRITE IN THIS SPACE			
		02192007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2733207 Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STRAUB, MARIE M. (MIMI) 4784 WEST BLVD. NAPLES, FL 34103		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 <u>Marie M. Straub (Mimi)</u> 4-2-07 <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when renewing) DATE</small>			
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	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STRAUB, MARIE M. (MIMI) 4784 WEST BLVD. NAPLES, FL 34103		
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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: <u>Marie M. Straub (Mimi) P.A.</u> 4-25-07 239-263-2940 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			