

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 10, 2007 8:00 am
Secretary of State

07-10-2007 90006 008 ***150.00

DOCUMENT # J65568

1. Entity Name
BUSINESS CONCEPTS INC.



Principal Place of Business
**6700 ORCHARD LAKE RD
NEW PORT RICHEY, FL 34653 US**

Mailing Address
**8717 BRAXTON DR
HUDSON, FL 34667**

40124042



DO NOT WRITE IN THIS SPACE

07052007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2782603

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CASSELS, BONNIE I.
8717 BRAXTON DR
HUDSON, FL 34667**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

SEE ATTACHED

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CASSELS, ROBERT W.
8717 BRAXTON DR
HUDSON, FL 34667**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPST
CASSELS, BONNIE I.
8717 BRAXTON DR
HUDSON, FL 34667**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/5/07 727-849-1382

ATTACHMENT
40124042

Page 1 of 1

Bonnie Cassels

From: Bonnie Cassels [bonniecassels@casstek.com]
Sent: Thursday, July 05, 2007 9:06 AM
To: 'corphelp@dos.state.fl.us'
Subject: Document #J65568 Business Concepts Inc. Memo

RE: J65568 Business Concepts Inc.

I have ~~not~~ received my 2007 Corporate Report for Filing. It can be noted that I have always been timely with this report in the past. Another tenant in this building also did not receive their notice for reporting. I have now submitted. Thank you

Bonnie Cassels
Business Concepts Inc.
dbd/Casstek Equipment Sales
6700 Orchid Lake Road
New Port Richey, FL 34653
888-849-1302 727-849-8570 fax bonniecassels@casstek.com

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7/5/2007