2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 09, 2008 8:00 am Secretary of State

DOCUMENT # L01434 1. Entity Name CONCEPTS INTERNATIONAL, INC.								04-09-2008	90032	009 ***15	50.00
Principal Plac	e of Business	Mailing Address				, ·					
	ROBERT LANGLEY		% MICHAEL ROBERT LANGLEY								
1026 BUCIDA RD Delray Beach, Fl. 33483-6648			1026 BUCIDA RD Delray Beach, Fl. 33483-6648								
2. Principal Place of Business - No P.O. Box #			3. Mailing Address						RILII OLEH BII		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03142008	Chg-P	CR2EC	34 (12/06)	
City & State			City & State			4. FEI Number 65-0286				plied For t Applicable	
Zip	Country		Zip Coun		itry		5. Certificate of Status Desired S8.75 Ad Fee Require				
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
LANGLEY, JANET A					Name						
1026 BUC			Street Address (P.O. Box Number is Not Acceptable)								
DELRAY BEACH, FL 33483							•				
					City				FL.	Zip Code	3
 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. 											
y a songention of regions as again.											
SIGNATURE Signature, typed or printed name of registered agent and tritle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution.											
10.	, :	OFFICERS AND DIR	DIRECTORS 11.				ADDITIONS/0	HANGES TO OFFI	CERS AND	DIRECTORS	SIN 11 ·
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name Street adoress	LANGLEY, MICHA 1026 BUCIDA RD	**		NAM	E Et adoress	_					
CITY-ST-ZIP	DELRAY BEACH,				-ST-ZIP						
TITLE	S		☐ Delete			00)	·	·····	Change	Addition
NAME	LANGLEY, JANET		NAM		_	, –					
STREET ADDRESS CITY-ST-ZIP	1026 BUCIDA RD DELRAY BEACH,			ET ADORESS -ST-ZIP							
TITLE	DELICAT BEACH,		☐ Detete	TITU						Change	☐ Addition
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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 sport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chaptered or on an attachment without address, with all other like empowered.											