

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90319 023 ***150.00

DOCUMENT # P01000051451

1. Entity Name
WINK AND COMPANY, INC.



Principal Place of Business
2818 CANYON FALLS DR
JACKSONVILLE, FL 32224

Mailing Address
2818 CANYON FALLS DR
JACKSONVILLE, FL 32224

50037378



04132005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3727260

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIWAK, BARBARA
305 RUNAWAY CIRCLE
PONTE VEDRA BEACH, FL 32082

**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
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME SPIWAK, BARBARA
STREET ADDRESS 2818 CANYON FALLS DR
CITY-ST-ZIP JACKSONVILLE, FL 32224

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Barbara Spiwak BARBARA SPIWAK

4-14-05

904-992-0792

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT
~~# PO 1000057457~~
~~50037378~~

4-4-05

To Whom it May Concern
I request an ~~ann~~ annual report
for my company, Wink & Longany, Inc.
My FET # is 59-322260.

Please mail it to:

Wink & Longany, Inc.
2818 Canyon Falls Dr.
Jor, FL 32224
904-992-0792

Sincerely,
Barbara Spiwat, President