


2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000126116	
1. Entity Name PERFECT IMAGE ULTRA SOUND OF HIGHLANDS COUNTY, INC.	

Principal Place of Business 2375 N. HIGHLANDS BLVD. AVON PARK, FL 33825	Mailing Address 2375 N. HIGHLANDS BLVD. AVON PARK, FL 33825
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FILED
07 JUL 10 PM 4:03
STATE
FLORIDA

66018655



05012007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1068714	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CULP, MARIE 2375 N. HIGHLANDS BLVD. AVON PARK, FL 33825
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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, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	200102356692 14/07-01074-001 **3972.50
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD CULP, MARIE 2375 N. HIGHLANDS BLVD. AVON PARK, FL 33825
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JR 2/10

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 Culp</u>	Date: <u>5-1-07</u>	Daytime Phone #: <u>863-273-9473</u>
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