


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000021957
 1. Entity Name
 MIKUS CAPITAL MANAGEMENT, INC.



Principal Place of Business
 220 OCEAN TERRACE
 PALM BEACH, FL 33480 US

Mailing Address
 PO BOX 3428
 PALM BEACH, FL 33480

DO NOT WRITE IN THIS SPACE



01052007 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2323769	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MIKUS, WILLIAM JOHN
 220 OCEAN TERRACE
 PALM BEACH, FL 33480

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: *William John Mikus* WILLIAM JOHN MIKUS 01-05-07
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. \$5.00 May Be Added to Fees

00000580061
 01/10/07-80032-011 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD MIKUS, WILLIAM JOHN 220 OCEAN TERRACE PALM BEACH, FL 33480
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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: *William John Mikus* WILLIAM JOHN MIKUS 01-05-07 (813) 574-0975
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #