

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

7/31/2007-90007-045-515000-\$150.00

FILED

2007 DEC 18 PM 3:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # P05000063134</b> 1. Entity Name <b>FINNIES INC.</b>					
Principal Place of Business <b>2345 EAST MICHIGAN STREET ORLANDO, FL 32806</b>			Mailing Address <b>2345 EAST MICHIGAN STREET ORLANDO, FL 32806</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>20-2971226</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>FLOWERS, FINNLES 2345 E MICHIGAN 3 ORLANDO, FL 32806</b>				7. Name and Address of Now Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				DATE	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		(NOTE: Registered Agents signature is required when reinstating)			
<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KERKOW, TAMARA F 2345 E MICHIGAN 3 ORLANDO, FL 32806	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			

REINSTATEMENT  
2007

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: *Tamara Kerkow* 07/27/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Finnie's Flowers and Antiques*  
*2345 E. Michigan Street*  
*Orlando FL, 32806*  
*(407)895-0911*




December 13, 2007

Jeraline Saulsberry  
Dept. Of State  
Clifton Bldg.  
2661 Executive Center Circle  
Tallahassee, FL 32301

Per our phone conversation, we did not received our 2007 annual report. If you would please waive the reinstatement fee it would be greatly appreciated. We have already paid the \$150.00 and would appreciate you applying it to the reinstatement. Thank you for your assistance with this matter. You have been very helpful.

Sincerely,



Tamara Kerkow  
Finnie's Flowers

*Merry Christmas !!*