


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 08:00 A
Secretary of State

DOCUMENT # P93000068310	
1. Entity Name WHIMSY ORCHIDS, INC.	

Principal Place of Business 18755 SW 248 ST HOMESTEAD, FL 33031 US	Mailing Address P O BOX 924304 HOMESTEAD, FL 33095-4304 US
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DO NOT WRITE IN THIS SPACE

04022007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0450186	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent O'HARE, RICHARD J ATTORNEY AND COUNSELOR 1550 MADRUGA AVE, SUITE 120 CORAL GABLES, FL 33146	DO NOT WRITE IN THIS SPACE
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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 _____ (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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT PETERS, WILLIAM A II 18755 SW 248 ST HOMESTEAD, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS PETERS, CAROL SCHIFF 18755 S W 248 ST HOMESTEAD, FL
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04/13/07-80004-008 150.00

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 A. Peters II WILLIAM A. PETERS II, PRESIDENT 2 APR 07 (305) 242-1333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #