

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 A
Secretary of State

DOCUMENT # P98000068738

1. Entity Name
CHARLIE MICHAELS, INC.



Principal Place of Business

**2212 58TH AVENUE E
BRADENTON, FL 34203**

Mailing Address

**2212 58TH AVENUE E
BRADENTON, FL 34203**



02082007

No Chg-P

CR2E034 (11/05)

4. FEI Number
65-0866573

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**KNOWLES, TIMOTHY A
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205**

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000689417
04/11/07-80034-017 158.75

10. OFFICERS AND DIRECTORS

TITLE	TSD
NAME	BERUF, CARLOS
STREET ADDRESS	2212 58TH AVE EAST
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	VP
NAME	TOKARZ, CHARLES
STREET ADDRESS	2212 58TH AVE EAST
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	VP
NAME	CANNY, ANNETTE L
STREET ADDRESS	2212 58TH AVE. E.
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Carlos Beruf

3/23/07

941
351-9000