

2007 FOR PROFIT CORPORATION ANNUAL REPORT

1 of 3

FILED

07 AUG 17 AM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08062007 Chg-P CR2E034 (12/06)

4. FEI Number
59-3594908

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FIKERT, MARY T
516 LANARKSHIRE PLACE
APOPKA, FL 32712

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME MOULAVI, DEBBIE
STREET ADDRESS 2284 EMBER ROAD
CITY-ST-ZIP OVIEDO, FL 32765

☐ Change ☐ Addition
100108849051
08/30/07--01045--011 **\$150.00

TITLE VP ☐ Delete
NAME LARACUENTE, RITA
STREET ADDRESS 14325 BENDING BRANCH COURT
CITY-ST-ZIP ORLANDO, FL 32824

☐ Change ☐ Addition
100108849051
08/30/07--01045--012 **\$8.75

TITLE T ☐ Delete
NAME FIKERT, THERSA T
STREET ADDRESS 516 LANARKSHIRE PLACE
CITY-ST-ZIP APOPKA, FL 32712

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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

(MARY T. Fikert)

8/15/07 407/342-4384

Date

Daytime Phone #

Mary Fikert

From: Mary Fikert [mtf1151@earthlink.net]
Sent: Friday, July 06, 2007 4:43 PM
To: corpHELP
Subject: RE: annual report

Thank you. I will do that!

-----Original Message-----

From: corpHELP
Sent: Jul 6, 2007 2:50 PM
To: mary fikert
Subject: RE: annual report

You can download the report and mail it in with the regular filing fee of \$150.00. Please include a letter for review as to why you are filing after May 1st.

To access your 2007 Annual Report go to our website www.sunbiz.org and in the upper portion of the homepage you will see two banners, one is an option to file online using a credit card and the other lets you download the report to be mailed in with payment.

Thanks,

Lee Yarbrough
Internet Access
Division of Corporations

From: mary fikert [mailto:mtf1151@earthlink.net]
Sent: Tuesday, July 03, 2007 10:29 AM
To: corpHELP
Subject: re: annual report

I completed online in April this application and gave all my credit card information. However, after I received your notice today I pulled out my paperwork to discover that I did not press the button to pay now. Would it be possible to send you a check for \$150.00 with this sheet showing you that I thought this was already paid in full.

Mary Fikert
Central Florida Wound & Skin Consultants, Inc.
P99000088025
email address: mtf1151@earthlink.net

7/8/2007

Florida Division of Corporations - Online Payment

Payment Method:

Electronic Filing

Online Payment System

Please Confirm Billing Information

Transaction Amount: **\$150.00**

Email Address: **mtf1151@earthlink.net**

Billing Name: **MARY T FIKERT**

Billing Address: **516 LANARKSHIRE PLACE**

Billing City: **APOPKA**

Billing State: **FL**

Billing Zip: **32712-**

Billing Phone Number: **4073424384**

Payment Method: **Visa**

Credit Card Number: **4147 [REDACTED]**

Credit Card Expiration Date: **05/2010**

Important Notice: Clicking the "Pay Now" button below more than one time may result in multiple charges to your account. Please click on the "Pay Now" button only one time. Please be patient. Your order is being processed.

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[Pay Now](#)