2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L52744

City-St-Zip: HOMESTEAD, FL

Entity Name: PASTRAN, P.A., CPA'S

FILED Apr 05, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
333 NE 8 STREET P O BOX 900969 HOMESTEAD, FL 330	030	333 NE 8 STREET HOMESTEAD, FL 3303	30 US	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
333 NE 8 STREET P O BOX 900969 HOMESTEAD, FL 33030		P.O. BOX 900969 HOMESTEAD, FL 3309	P.O. BOX 900969 HOMESTEAD, FL 330900969 US	
FEI Number: 65-0175562	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
PASTRAN, RAUL E 333 NE 8 STREET HOMESTEAD, FL 330	030 US			
The above named entiin the State of Florida.	ty submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		gent	Date	
Election Campaign Financ	cing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: PTS Name: PASTRAN, F	•	Title: (Name: Address:) Change ()Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAUL E PASTRAN PTS 04/05/2007