

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078613

FILED
Apr 08, 2004
Secretary of State

Entity Name: SONYA JACQUELINE MICHELINI P.A.

Current Principal Place of Business:

1168 CHINABERRY DR
WESTON, FL 33327

New Principal Place of Business:

510 SPINNAKER DR
WESTON, FL 33326

Current Mailing Address:

1168 CHINABERRY DR
WESTON, FL 33327

New Mailing Address:

1168 SPINNAKER DR
WESTON, FL 33326

FEI Number: 43-2023507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COATS, JESSE F CPA
5200 NW 33 AVE SUITE 218
FORT LAUDERDALE, FL 33309

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MICHELINI, SONYA J
Address: 1168 CHINABERRY DR
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: MICHELINI, VITALIANO J
Address: 1168 CHINABERRY DR
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MICHELINI, SONYA J
Address: 510 SPINNAKER DR
City-St-Zip: WESTON, FL 33326

Title: D (X) Change () Addition
Name: MICHELINI, VITALIANO J
Address: 510 SPINNAKER DR
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SONYA MICHELINI

D

04/08/2004

Electronic Signature of Signing Officer or Director

Date