

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000080603

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: IRAN VENTO PA

**Current Principal Place of Business:**

7270 EASTWOOD ACRES RD  
FT MYERS, FL 33905

**New Principal Place of Business:**

**Current Mailing Address:**

7270 EASTWOOD ACRES RD  
FT MYERS, FL 33905

**New Mailing Address:**

FEI Number: 20-5023547

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VENTO, IRAN  
7270 EASTWOOD ACRES RD  
FT MYERS, FL 33905 US

**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: P ( ) Delete  
Name: VENTO, IRAN  
Address: 7270 EASTWOOD ACRES RD  
City-St-Zip: FT MYERS, FL 33905 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: ESTEVEZ, YELENIS  
Address: 7270 EASTWOOD ACRES RD  
City-St-Zip: FT MYERS, FL 33905 US

I hereby certify that the information supplied with this filing does not qualify 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: YELENIS ESTEVEZ

VP

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date