2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F94000003594

1. Entity Name BALDOMERO & COMPANY, P.C.



FILED Apr 18, 2007 08:00 All Secretary of State

Principal Place of Business

Mailing Address

7000 BOULEVARD EAST (LOWER MALL) GUTTENBERG, NJ 07093 7000 BOULEVARD EAST (LOWER MALL) GUTTENBERG, NJ 07093



01242007

No Chg-P

CR2E034 (11/05)

4. FEI Number 22-3284534 Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALDOMERO, JOSEPH A CPA THE CRYSTAL HOUSE BUILDING 5055 COLLINS AVE 8B MIAMI BEACH, FL 33140

DO NOT WRITE

B. 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 Speed or printed rame of registered agent with its 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 Speed or printed rame of registered agent with its advanced agent is required to provide a second agent is registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Speed or printed rame of registered agent is required agent in the State of Florida. I am familiar with, and accept the obligations of registered agent. Or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Speed or printed rame of registered agent. Or both in the State of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept agent a	MIAMI BEA	ACH, FL 33140		. ``.		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 P. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ITILE PSD BALDOMERO, JOSEPH A STREET ADDRESS CITY-SI-72P TITLE NAME SIREET ADDRESS CITY-SI-72P TITLE SIREET ADDRESS CITY-SI-72P TITLE NAME SIREET ADDRESS CITY-SI-72P TITLE SIREET ADDRESS CITY-SI-72P TITLE SIREET ADDRESS CITY-SI-72P TITLE NAME SIREET ADDRESS CITY-SI-72P TITLE NAME SIREET ADDRESS CITY-SI-72P			urpose of changing its register	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS IIILE BALDOMERO, JOSEPH A 7000 BOULEVARD EAST, LOWER MALL GUTTENBERG, NJ 07093 TITLE MAME SIRET ADDRESS CITY-ST-ZP TITLE TITLE TITLE STREET ADDRESS CITY-ST-ZP TITLE		Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registere	d Agent signature	required when reinstating)	DATE
TITLE NAME SIRET ADDRESS CITY-ST-ZIP	FIL	E NOW!!! FEE IS \$150.00	9. Election Campaign Finar	noing	\$5.00 May Be	
MAME SIRET ADDRESS CITY-ST-ZIP TITLE MAME SIRET ADDRESS CITY-ST-ZIP	10.		TORS	,		
TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME COORDOT WRITE U00000715247 TOTAL COORDOT WRITE U000000715247 TOTAL COORDOT WRITE U00000715247 TOTAL COORDOT WRITE U000	NAME STREET ADDRESS	BALDOMERO, JOSEPH A 7000 BOULEVARD EAST, LOWER MA	NLL		to the second se	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME COODULT 15247 CONTROL		GUTTENBERG, NJ 07093		-		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE U00000715247 U00000715247 TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE U00000715247 TITLE NAME STREET ADDRESS CITY-ST-ZIP					• •	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TO NOT WRITE IN THIS SPACE U00000715247 104/27/07-80055-018 158 75		•				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP						ित्त के प्राप्त के कार्य कर कर के प्राप्त के किया है जिस के किया है कि किया है जिस के किया है जिस के किया है क विकास के प्राप्त के किया किया किया किया किया किया किया किया
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTAL NAME STREET ADDRESS CITY-ST-ZIP			•		חס	NOT WRITE
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP						
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP U00000715247 04/27/07-80055-018 158 75					IN:	THIS SPACE
TITUE NAME STREET ADDRESS CITY-ST-ZIP U00000715247 04/27/07-80055-018-158-75	STREET ADDRESS		<u> </u>			
NAME STREET ADDRESS CITY- ST- ZIP	CITY-ST-ZIP				, ⁴⁸ 44	
STREET ADDRESS CITY-ST-ZIP				; b+ .	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	UUUUUUT152#ff\;\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
· · · · · · · · · · · · · · · · · · ·						a net citationname transfer and the
■ TO COLOR OF THE	CITY-ST-ZIP				1 , , , , , , , , , , , , , , , , , , ,	
NAME	TITLE				in in	"自己的,是不是一个,我们就是一个人的。"

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 suppliemental 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 of true tee empowered to execute this eport 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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

r 4

Daytime Phone #