

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K22546

FILED  
Apr 19, 2007  
Secretary of State

Entity Name: SASSER, CESTERO & SASSER, P.A.

## Current Principal Place of Business:

1800 AUSTRALIAN AVE SO  
SUITE 203  
W PALM BEACH, FL 33409

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 2907  
W PALM BEACH, FL 33402 US

## New Mailing Address:

FEI Number: 65-0049204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SASSER, DONALD J MR  
1800 AUSTRALIAN AVENUE SO. STE 203  
W PALM BEACH, FL 33409 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: PSD ( ) Delete  
Name: SASSER, DONALD J MR.  
Address: 1800 AUSTRALIAN AVE SO, STE 203  
City-St-Zip: W PALM BEACH, FL

Title: V ( ) Delete  
Name: CESTERO, JORGE M  
Address: 1800 AUSTRALIAN AVENUE S SUITE 203  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V ( ) Delete  
Name: SASSER, THOMAS J  
Address: 1800 AUSTRALIAN AVENUE S SUITE 203  
City-St-Zip: WEST PALM BEACH, FL 33409

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: DONALD J. SASSER

PSD

04/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date