

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L71134

FILED  
Apr 15, 2010  
Secretary of State

**Entity Name:** LAW OFFICES OF NORLIZA BATTS, P.A.

**Current Principal Place of Business:**

2805 E. OAKLAND PARK BLVD.  
STE. 402  
FT. LAUDERDALE, FL 33306 US

**New Principal Place of Business:**

**Current Mailing Address:**

2805 E. OAKLAND PARK BLVD.  
STE. 402  
FT. LAUDERDALE, FL 33306 US

**New Mailing Address:**

**FEI Number:** 65-0204535      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BATTS, NORLIZA  
2805 E OAKLAND PK BLVD.  
STE. 402  
FT. LAUDERDALE, FL 33306 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: PTS  
Name: BATTS, NORLIZA  
Address: 2805 E. OAKLAND PARK BLVD. #402  
City-St-Zip: FT. LAUDERDALE, FL 33306

I hereby 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 all other like empowered.

SIGNATURE: NORLIZA BATTS

PRES

04/15/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date