## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # M68749**

1. Entity Name

ELLEN WRUBEL, P.A.



**FILED** Apr 13, 2007 08:00 Al Secretary of State

Fee Required

Principal Place of Business

% ELLEN WRUBEL 3343 FORREST DR HOLLYWOOD, FL 33021 Mailing Address

% ELLEN WRUBEL 3343 FORREST DR HOLLYWOOD, FL 33021



## DO NOT WRITE IN THIS SPACE

03302007 No Chg-P		CR2E034 (11/05)			
4. FEI Number			Applied For		
65-00318	380		Not Applicab		
5. Certificate of	Status Desired		\$8.75 Additional		

6. Name and Address of Current Registered Agent

WRUBEL, ELLEN 3343 FOREST DR HOLLYWOOD, FL. 33021

## DO NOT WRITE

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the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title to	fapplicable (NOTE, Registered	Agent signature required when reinstelling) DAFE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	aing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WRUBEL, ELLEN 3343 FOREST DR HOLLYWOOD, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000704051 04/20/07-80163-022 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the corchanged.	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an activess, with all	ling does not qualify for the exe and accurate and that my signat to execute this report as requir other like emflowaged.	emptions colure shall have by Chap	ntained in Chapter 119 ve the same legal effe ter 607, Florida Statuti	<ol> <li>Florida Statutes, I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if</li> </ol>