

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028430

**FILED**  
**Apr 20, 2007**  
**Secretary of State**

**Entity Name:** COLOME & ASSOCIATES, INC.

**Current Principal Place of Business:**

315 26TH STREET  
WEST PALM BEACH, FL 33407 US

**New Principal Place of Business:**

530 24TH STREET  
WEST PALM BEACH, FL 33407 US

**Current Mailing Address:**

315 26TH STREET  
WEST PALM BEACH, FL 33407 US

**New Mailing Address:**

530 24TH STREET  
WEST PALM BEACH, FL 33407 US

**FEI Number:** 65-0993244      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

COLOME, ELIZABETH  
315 26TH STREET  
WEST PALM BEACH, FL 33407 US

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

COLOME, ELIZABETH  
530 24TH STREET  
WEST PALM BEACH, FL 33407 US

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: ELIZABETH COLOME      04/20/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PTSD ( ) Delete  
Name: COLOME, ELIZABETH A  
Address: 305 28TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

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

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: ELIZABETH A. COLOME'      PTSD      04/20/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date