

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000006955

**FILED**  
**Jan 19, 2007**  
**Secretary of State**

**Entity Name:** DONNA B. MICHELSON, P.A.

**Current Principal Place of Business:**

2937 SW 27TH AVE  
206  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

10301 S.W. 69TH AVENUE  
MIAMI, FL 33156

**New Mailing Address:**

2937 SW 27TH AVE  
206  
MIAMI, FL 33133 US

**FEI Number:** 65-1067204

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MICHELSON, DONNA B  
10301 S.W. 69TH AVENUE  
MIAMI, FL 33156 US

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

MICHELSON, DONNA B  
2937 SW 27TH AVENUE  
206  
MIAMI, FL 33133 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: DONNA B. MICHELSON

01/19/2007

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MICHELSON, DONNA B  
Address: 10301 S.W. 69TH AVENUE  
City-St-Zip: MIAMI, FL 33156

**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: DONNA B. MICHELSON

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01/19/2007

Electronic Signature of Signing Officer or Director

Date