

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020693

Entity Name: GIOVANNI NICOSIA, P.A.

FILED
Jul 06, 2008
Secretary of State

Current Principal Place of Business:

1700 N UNIVERSITY DR
#110
CORAL SPRINGS, FL 33071

New Principal Place of Business:

5595 ORANGE DRIVE #201
DAVIE, FL 33314

Current Mailing Address:

1700 N UNIVERSITY DR
#110
CORAL SPRINGS, FL 33071

New Mailing Address:

5595 ORANGE DRIVE #201
DAVIE, FL 33314

FEI Number: 65-1098314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICOSIA, GIOVANNI
1700 N UNIVERSITY DR #110
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

NICOSIA, GIOVANNI
5595 ORANGE DRIVE #201
DAVIE, FL 33314 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: GIOVANNI NICOSIA

07/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NICOSIA, GIOVANNI
Address: 1700 N UNIVERSITY DR #110
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NICOSIA, GIOVANNI
Address: 5595 ORANGE DRIVE #201
City-St-Zip: DAVIE, FL 33314

I hereby certify that the information supplied with this filing does not qualify 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: GIOVANNI NICOSIA

PRES

07/06/2008

Electronic Signature of Signing Officer or Director

Date