

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000025974

FILED  
Mar 31, 2010  
Secretary of State

**Entity Name:** LAW OFFICES OF FELICIA SHAMAN, P.A.

**Current Principal Place of Business:**

200 SE 6TH STREET  
SUITE 404  
FT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

200 SE 6TH STREET  
SUITE 404  
FT LAUDERDALE, FL 33301

**New Mailing Address:**

**FEI Number:** 65-1089281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHAMAN, FELICIA ESQ  
200 SE 6TH STREET  
SUITE 404  
FT LAUDERDALE, FL 33301 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: PD  
Name: SHAMAN, FELICIA  
Address: 9293 OAK GROVE CIRCLE  
City-St-Zip: DAVIE, FL 33328

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:** FELICIA SHAMAN

PD

03/31/2010

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

\_\_\_\_\_  
Date