


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90849 044 \*\*\*150.00

<b>DOCUMENT # P01000035344</b>	
1. Entity Name <b>JULIO E. GONZALEZ, JR., P.A.</b>	

Principal Place of Business <b>2500 HOLLYWOOD BLVD #309 HOLLYWOOD, FL 33020</b>	Mailing Address <b>2500 HOLLYWOOD BLVD #309 HOLLYWOOD, FL 33020</b>
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2. Principal Place of Business - No P.O. Box # <b>10228 Guatemala Street</b>	3. Mailing Address <b>10228 Guatemala Street</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>Copper City, FL</b>	City & State <b>Copper City, FL</b>
Zip <b>33026</b>	Zip <b>33026</b>
Country	Country

**40093631**



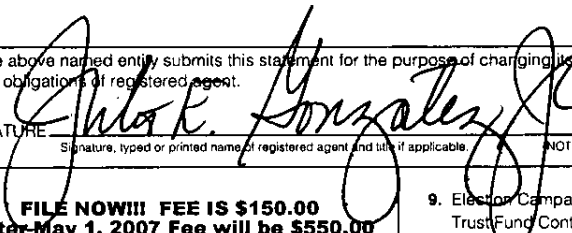
04092007 Chg-P CR2E034 (12/06)

4. FEI Number <b>65-1095577</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>GONZALEZ, JULIO E JR ESQ 2500 HOLLYWOOD BLVD #209 HOLLYWOOD, FL 33020</b>
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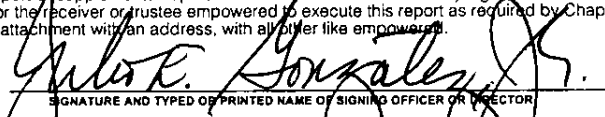
7. Name and Address of New Registered Agent	
Name <b>Judge Julio E. Gonzalez, Jr.</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>10228 Guatemala Street</b>	
City <b>Copper City</b>	FL Zip Code <b>33026</b>

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE <b>4/28/07</b>
NOTE: Registered Agent signature required when reinstating.	

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT GONZALEZ, JULIO E JR ESQ 2500 HOLLYWOOD BLVD #309 HOLLYWOOD, FL 33020 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Judge Julio E. Gonzalez, Jr. 10228 Guatemala Street Copper City, FL 33026</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.	
SIGNATURE: 	DATE <b>4/28/07</b> 954-831-7489
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	