

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000046105

FILED
Mar 26, 2007
Secretary of State

Entity Name: BETH WATTS DOMINGUEZ, CPA, PA

Current Principal Place of Business:

11997 S. US HWY. 441
BELLEVIEW, FL 34421

New Principal Place of Business:

Current Mailing Address:

PO BOX 2227
BELLEVIEW, FL 344212227

New Mailing Address:

FEI Number: 59-3723280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOMINGUEZ, BETH WATTS
11997 S. US HWY. 441
BELLEVIEW, FL 34421 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: D () Delete
Name: DOMINGUEZ, BETH WATTS
Address: 11997 S. US HWY. 441
City-St-Zip: BELLEVIEW, FL 34421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DOMINGUEZ, BETH WATTS
Address: 11997 S. US HWY. 441
City-St-Zip: BELLEVIEW, FL 34421

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: BETH WATTS DOMINGUEZ

PRES

03/26/2007

Electronic Signature of Signing Officer or Director

_____ Date