

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000014966

FILED  
Apr 24, 2007  
Secretary of State

**Entity Name:** THE LAW OFFICES OF MARIO O. MATEO, P.A.

**Current Principal Place of Business:**

633 N.E. 167TH STREET  
SUITE 1109  
N. MIAMI BEACH, FL 33162

**New Principal Place of Business:**

2380 SW 117TH AVENUE  
MIRAMAR, FL 33025

**Current Mailing Address:**

633 N.E. 167TH STREET  
SUITE 1109  
N. MIAMI BEACH, FL 33162

**New Mailing Address:**

2380 SW 117TH AVENUE  
MIRAMAR, FL 33025

**FEI Number:** 01-0593551

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATEO, MARIO O  
2380 SW 117TH AVE  
MIRAMAR, FL 33025 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: PCEO ( ) Delete  
Name: MATEO, MARIO O  
Address: 2380 SW 117TH AVE  
City-St-Zip: MIRAMAR, FL 33025

**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 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:** MARIO MATEO

PCEO

04/24/2007

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

\_\_\_\_\_  
Date