

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035645

FILED  
Apr 06, 2008  
Secretary of State

Entity Name: THE LAW OFFICES OF BONNE Z. SCHEFLIN, P.A.

## Current Principal Place of Business:

4699 SW 64TH AVENUE  
DAVIE, FL 33314

## New Principal Place of Business:

2114 NORTH FLAMINGO ROAD  
#181  
PEMBROKE PINES, FL 33028 US

## Current Mailing Address:

4699 SW 64TH AVENUE  
DAVIE, FL 33314

## New Mailing Address:

2114 NORTH FLAMINGO ROAD  
#181  
PEMBROKE PINES, FL 33028 US

FEI Number: 32-0012713

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHEFLIN, BONNE Z ESQ.  
4699 SW 64TH AVENUE  
DAVIE, FL 33314 US

## Name and Address of New Registered Agent:

SCHEFLIN, BONNE Z ESQ.  
2114 NORTH FLAMINGO ROAD  
#181  
PEMBROKE PINES, FL 33028 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: BONNE Z. SCHEFLIN, ESQ,

04/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: SCHEFLIN, BONNE Z PRES.  
Address: 4699 SW 64TH AVENUE  
City-St-Zip: DAVIE, FL 33314

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SCHEFLIN, BONNE Z PRES.  
Address: 2114 NORTH FLAMINGO ROAD, #181  
City-St-Zip: PEMBROKE PINES, FL 33028 US

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: BONNE Z. SCHEFLIN

PRES

04/06/2008

Electronic Signature of Signing Officer or Director

Date