

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078923

**FILED**  
**Apr 28, 2008**  
**Secretary of State**

**Entity Name:** KATYUSKA E. VAZQUEZ, P.A.

**Current Principal Place of Business:**

24234 SW 109 PATH  
HOMESTEAD, FL 33032

**New Principal Place of Business:**

8536 SW 165 PLACE  
MIAMI, FL 33193

**Current Mailing Address:**

24234 SW 109 PATH  
HOMESTEAD, FL 33032

**New Mailing Address:**

8536 SW 165 PLACE  
MIAMI, FL 33193

**FEI Number:** 06-1639618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAZQUEZ, KATYUSKA E  
24234 SW 109 PATH  
HOMESTEAD, FL 33032 US

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

VAZQUEZ, KATYUSKA E  
8536 SW 165 PLACE  
MIAMI, FL 33193 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:**

04/28/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPVS ( ) Delete  
Name: VAZQUEZ, KATYUSKA E  
Address: 24234 SW 109 PATH  
City-St-Zip: HOMESTEAD, FL 33032

Title: T ( ) Delete  
Name: VAZQUEZ, KATYUSKA E  
Address: 24234 SW109 PATH  
City-St-Zip: MIAMI, FL 33032

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPVS (X) Change ( ) Addition  
Name: VAZQUEZ, KATYUSKA E  
Address: 8536 SW 165 PLACE  
City-St-Zip: MIAMI, FL 33193

Title: T (X) Change ( ) Addition  
Name: VAZQUEZ, KATYUSKA E  
Address: 8536 SW 165 PLACE  
City-St-Zip: MIAMI, FL 33193

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:** KATYUSKA VAZQUEZ

DPVS

04/28/2008

Electronic Signature of Signing Officer or Director

Date