

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095595

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: VINCE POMPA & ASSOCIATES, INC.

## Current Principal Place of Business:

6410 NW 28 ST  
SUNRISE, FL 33021

## New Principal Place of Business:

6410 NW 28 ST  
SUNRISE, FL 33313

## Current Mailing Address:

6410 NW 28 ST  
SUNRISE, FL 33021

## New Mailing Address:

6410 NW 28 ST  
SUNRISE, FL 33313

FEI Number: 90-0047176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POMPA, VINCE  
6410 NW 28 ST  
SUNRISE, FL 33021 US

## Name and Address of New Registered Agent:

POMPA, VINCE  
6410 NW 28 ST  
SUNRISE, FL 33313 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:

07/09/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: POMPA, VINCE  
Address: 6410 NW 28 ST  
City-St-Zip: SUNRISE, FL 33021

Title: S ( ) Delete  
Name: POMPA, SUE ELLEN  
Address: 6410 NW 28 ST  
City-St-Zip: SUNRISE, FL 33021

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition  
Name: POMPA, VINCE  
Address: 6410 NW 28 ST  
City-St-Zip: SUNRISE, FL 33313

Title: S (X) Change ( ) Addition  
Name: POMPA, SUE ELLEN  
Address: 6410 NW 28 ST  
City-St-Zip: SUNRISE, FL 33313

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: VINCENT POMPA

PRES

07/09/2007

Electronic Signature of Signing Officer or Director

Date