## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006657

**Entity Name:** COSTA PROFESSIONAL CORPORATION

FILED May 01, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

633 SW 11TH PLACE 707 SW 22ND STREET CAPE CORAL, FL 33991 CAPE CORAL, FL 33991

**Current Mailing Address: New Mailing Address:** 

633 SW 11TH PLACE 707 SW 22ND STREET CAPE CORAL, FL 33991 CAPE CORAL, FL 33991

FEI Number: 16-1647647 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ALL FLORIDA FIRM INC COSTA, OLAVO 465 S VOLUSIA AVE 707 SW 22ND STREET CAPE CORAL, FL 33991 US SUITE C ORANGE CITY, FL 32763 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: OLAVO COSTA 05/01/2008

> 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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition COSTA, OLAVO P COSTA, OLAVO P Name: Name: 633 SW 11TH PLACE 707 SW 22ND STREET Address: Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: CAPE CORAL, FL 33991

Title: Title: VΡ () Delete (X) Change ( ) Addition Name: COSTA, THIAGO Name: COSTA, TELMA

633 SW 11TH PLACE 707 SW 22ND STREET Address: Address: CAPE CORAL, FL 33991 CAPE CORAL, FL 33991 City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title:

DE LIMA COSTA, THIAGO S COSTA, THIAGO S Name: Name: 633 SW 11TH PLACE 707 SW 22ND STREET Address: Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: CAPE CORAL, FL 33991

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.

VΡ SIGNATURE: TELMA COSTA 05/01/2008