

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015816

Entity Name: VICTORIA CASSO P.A.

FILED  
Apr 02, 2007  
Secretary of State

## Current Principal Place of Business:

7133 VIA LEONARDO  
LAKE WORTH, FL 33467

## New Principal Place of Business:

7650 OLD THYME COURT  
PARKLAND, FL 33076

## Current Mailing Address:

7133 VIA LEONARDO  
LAKE WORTH, FL 33467

## New Mailing Address:

7650 OLD THYME COURT  
PARKLAND, FL 33076

FEI Number: 59-3766881

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASSO, VICTORIA  
7133 VIA LEONARDO  
LAKE WORTH, FL 33467 US

## Name and Address of New Registered Agent:

CASSO, VICTORIA  
7650 OLD THYME COURT  
PARKLAND, FL 33076 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: VICTORIA CASSO

04/02/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CASSO, VICTORIA  
Address: 7133 VIA LEONARDO  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CASSO, VICTORIA  
Address: 7650 OLD THYME COURT  
City-St-Zip: PARKLAND, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the 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: VICTORIA CASSO

D

04/02/2007

Electronic Signature of Signing Officer or Director

Date