

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000050590

Entity Name: JUDE POMPARO, INC.

FILED  
Apr 12, 2006  
Secretary of State

## Current Principal Place of Business:

1627 RIVERVIEW RD #415  
DEERFIELD BEACH, FL 33441

## New Principal Place of Business:

1627 RIVERVIEW RD #415  
DEERFIELD BEACH, FL 33441 US

## Current Mailing Address:

1627 RIVERVIEW RD #415  
DEERFIELD BEACH, FL 33441

## New Mailing Address:

1627 RIVERVIEW RD #415  
DEERFIELD BEACH, FL 33441 US

FEI Number: 75-3114393

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTH, SCOTT A ESQ.  
1183 71ST ST.  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TARRY, MALCOLM  
Address: 1627 RIVERVIEW RD #415  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: TARRY, MALCOLM  
Address: 1627 RIVERVIEW RD #415  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: VP ( ) Change (X) Addition  
Name: TARRY, VERONICA  
Address: 1627 RIVERVIEW RD #415  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

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: MALCOLM TARRY

PD

04/12/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date