## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061582

Entity Name: SALAZAR & ASSOCIATES, INC.

## FILED Apr 27, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|
|                                      |                                 |

9753 SOUTH ORANGE BLOSSOM TRAIL 9753 SOUTH ORANGE BLOSSOM TRAIL

SUITE 209 SUITE 202 ORLANDO, FL 32837

ORLANDO, FL 32837

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

9753 SOUTH ORANGE BLOSSOM TRAIL 9753 SOUTH ORANGE BLOSSOM TRAIL

SUITE 209 SUITE 202 ORLANDO, FL 32837

ORLANDO, FL 32837

FEI Number: 20-0030533 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:

SALAZAR, IVAN A SALAZAR, IVAN A 9753 S ORANGE BLOSSOM TRAIL 13203 MEÁDOWFIELD DRIVE

SUITE 209 ORLANDO, FL 32824 ORLANDO, FL 32837 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: IVAN A SALAZAR 04/27/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SALAZAR, IVAN A Name: SALAZAR, IVAN A Name: 9753 S ORANGE BLOSSOM TRAIL #209 13203 MEADOWFIELD DRIVE Address: Address:

City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ORLANDO, FL 32824

Title: VP,S Title: VΡ (X) Change ( ) Addition () Delete Name: Name: PEDRAZA, SANDRA

VALECILLOS, ALBERTO E 3004 COQUINA CT BLG 23 APT 106 13203 MEADOWFIELD DRIVE Address: Address:

KISSIMMEE, FL 34746 ORLANDO, FL 32824 City-St-Zip: City-St-Zip:

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

Name: PEDRAZA, MARTHA P Name: 12850 OULTON CIRCLE Address Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32832

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.

Ρ SIGNATURE: IVAN A SALAZAR 04/27/2006