## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000130618

Entity Name: DAMARIS ALAMO, P.A.

FILED Apr 14, 2005 Secretary of State

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

10872 SW BLUE MEAS WAY
PORT ST. LUCIE, FL 34987

10872 SW BLUE MESA WAY
PORT ST. LUCIE, FL 34987

Current Mailing Address: New Mailing Address:

10872 SW BLUE MEAS WAY
PORT ST. LUCIE, FL 34987

10872 SW BLUE MESA WAY
PORT ST. LUCIE, FL 34987

FEI Number: 20-0404657 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ALAMO, DEMARIS

10872 SW BLUE MEAS WAY

PORT ST. LUCIE, FL 34987 US

ALAMO, DAMARIS

10872 SW BLUE MESA WAY

PORT ST. LUCIE, FL 34987 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: DAMARIS ALAMO 04/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:ALAMO, DEMARISName:ALAMO, DAMARISAddress:10872 SW BLUE MEAS WAYAddress:10872 SW BLUE MESA WAY

City-St-Zip: PORT ST. LUCIE, FL 34987 City-St-Zip: PORT ST. LUCIE, FL 34987

Title: S () Delete Title: S (X) Change () Addition Name: RILEY, MAGBIS Name: RILEY, MAGBIS

Address: 10872 SW BLUE MEAS WAY
City-St-Zip: PORT ST. LUCIE, FL 34987

City-St-Zip: PORT ST. LUCIE, FL 34987

City-St-Zip: PORT ST. LUCIE, FL 34987

City-St-Zip: PORT ST. LUCIE, FL 34987 City-St-Zip: PORT ST. LUCIE, FL 3498

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAMARIS ALAMO P 04/14/2005