

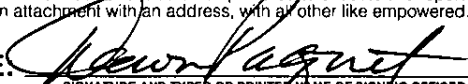


FILED
Feb 13, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000006619				Feb 13, 2008 08:00 Secretary of State					
1. Entity Name DAWN PAQUET, PA									
Principal Place of Business 314 SE 4TH TERR. DANIA BEACH, FL 33004		Mailing Address 314 SE 4TH TERR. DANIA BEACH, FL 33004							
<div> 01142008 No Chg-P CR2E034 (11/05)</div> <div><table border="1"><tr><td>4. FEI Number 20-0598712</td><td>Applied For <input type="checkbox"/> Not Applicable</td></tr><tr><td>5. Certificate of Status Desired <input type="checkbox"/></td><td>\$8.75 Additional Fee Required</td></tr></table></div>						4. FEI Number 20-0598712	Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required								
DO NOT WRITE IN THIS SPACE									
6. Name and Address of Current Registered Agent PAQUET, DAWN 314 SE 4TH TERR. DANIA BEACH, FL 33004		DO NOT WRITE IN THIS SPACE							
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>									
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PAQUET, DAWN 314 SE 4TH TERR. DANIA BEACH, FL 33004								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.									
SIGNATURE: 		2/10/08 954914-289							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #							