2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000011882

Entity Name: NICOLETTE RADA, P.A.

FILED Feb 23, 2007 Secretary of State

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

2050 SE CRYSTAL MIST 15080 NW 12 TERRACE PORT ST. LUCIE, FL 34983 OKEECHOBEE, FL 34972

Current Mailing Address: New Mailing Address:

BOX 9101 BOX 9046

PORT ST. LUCIE, FL 34985 PORT ST. LUCIE, FL 34985

FEI Number: 20-0654364 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:

RADA, NICOLETTE
2050 SE CRYSTAL MIST
PORT ST. LUCIE, FL 34983 US
RADA, NICOLETTE
15080 NW 12 TERRACE
OKEECHOBEE, FL 34972 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: NICOLETTE RADA 02/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 RADA, NICOLETTE
 Name:
 RADA, NICOLETTE

 Address:
 2050 SE CRYSTAL MIST
 Address:
 15080 NW 12 TERRACE

 City-St-Zip:
 PORT ST. LUCIE, FL 34983
 City-St-Zip:
 OKEECHOBEE, FL 34972

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: NICOLETTERADA PRES 02/23/2007