2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000050626

1. Entity Name REGINA RAMALHEIRA, P.A.

FILED
Mar 19, 2007 08:00 AM
Secretary of State

Principal Place of Business

16011 TAMPA PALMS BLVD. WEST TAMPA, FL 33647 Mailing Address

16011 TAMPA PALMS BLVD. WEST TAMPA, FL 33647



02262007

No Chg-P

CR2E034 (11/05)

4. FEI Number 90-0181097

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAMALHEIRA, REGINA 16011 TAMPA PALMS BLVD. WEST TAMPA, FL 33647

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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	named entity submits this statement for the pions of registered agent.	surpose of changing its registe	ered office or r	egistered agent, or both	n, in the State of Florida. I am familiar with, and accept
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMALHEIRA, REGINA 16011 TAMPA PALMS BLVD. WEST TAMPA, FL 33647				

U00000672788 03/29/07-80002-014 150.00

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 recently 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 attaching with an address, with all other like empowered.

SIGNATURE: LEGING W KAMATCHELIA LA

7 813-977

Daytime Phone