


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2008 8:00 am**  
**Secretary of State**

05-14-2008 90011 015 \*\*\*150.00

DOCUMENT # P04000053216					
1. Entity Name <b>TAULER LAW FIRM, P.A.</b>					
Principal Place of Business <b>9554 N.W. 41 STREET DORAL, FL 33178</b>			Mailing Address <b>9554 N.W. 41 STREET DORAL, FL 33178</b>		
2. Principal Place of Business - No P.O. Box # <b>9550 NW 41 Street</b>		3. Mailing Address <b>Same</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>Doral, Florida</b>		City & State		4. FEI Number <b>20-0930480</b>	
Zip <b>33178</b>		Country <b>U.S.A.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>TAULER, ELENA C ESQ. 9554 N.W. 41 STREET DORAL, FL 33178</b>			7. Name and Address of New Registered Agent Name <b>ELENA C. TAULER</b> Street Address (P.O. Box Number is Not Acceptable) <b>9550 NW 41 Street</b> City <b>Doral</b> State <b>FL</b> Zip Code <b>33178</b>		
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 <u><i>Elena Tauler</i></u> DATE <u>5/8/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR TAULER, ELENA C ESQ. 9554 N.W. 41 STREET DORAL, FL 33178 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Tauler ELENA C. ESQ. 9550 NW 41 Street Doral FL 33178 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 all other like empowered.					
SIGNATURE: <u><i>Elena Tauler</i></u>			Date <u>5/9/08</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		

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## 2008 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the 'Continue' button at the bottom to generate the annual report form.

**\*\* The document number, business name and file date cannot be changed on the report. \*\***

**Document Number** P04000053216

**Business Entity Name** TAULER LAW FIRM, P.A.

**Original File Date** 03/22/2004

**FEI Number** 20-0930480

**Principal Address** 9554 N.W. 41 STREET  
DORAL, FL 33178

**Mailing Address** 9554 N.W. 41 STREET  
DORAL, FL 33178

**Registered Agent** ESQ. ELENA C TAULER  
9554 N.W. 41 STREET  
DORAL, FL 33178

### Officer/Director Name And Address

MGR  
ESQ. ELENA C TAULER  
9554 N.W. 41 STREET  
DORAL, FL 33178

☒ **After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.**

If all of the above  
information is correct and  
you do not wish to make  
any changes, please  
select:

If you need to make  
changes to the above  
information, please  
select: