

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099234

Entity Name: ALAN C MEDICI, PA

FILED  
May 02, 2007  
Secretary of State

**Current Principal Place of Business:**

218 SAN SEBASTIAN AVE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

2100 PLUMOSA WAY  
INDIALANTIC, FL 32903

**Current Mailing Address:**

218 SAN SEBASTIAN AVE  
CORAL GABLES, FL 33134

**New Mailing Address:**

2100 PLUMOSA WAY  
INDIALANTIC, FL 32903

FEI Number: 20-1301835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEDICI, ALLAN C  
218 SAN SEBASTIAN AVE  
CORAL GABLES, FL 33134 US

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

MEDICI, ALLAN C  
2100 PLUMOSA WAY  
INDIALANTIC, FL 32903 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: ALLAN MEDICI

05/02/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MEDICI, ALLAN C  
Address: 218 SAN SEBASTIAN AVE  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MEDICI, ALLAN C  
Address: 2100 PLUMOSA WAY  
City-St-Zip: INDIALANTIC, FL 32903

I hereby certify that the information supplied with this filing does not qualify 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: ALLAN MEDICI

P

05/02/2007

Electronic Signature of Signing Officer or Director

Date