

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134996

**FILED**  
**Jul 17, 2005**  
**Secretary of State**

**Entity Name:** SOCARRAS & ASSOCIATES, INC.

**Current Principal Place of Business:**

3617 PERSHING AVENUE  
ORLANDO, FL 32812

**New Principal Place of Business:**

2976 ST. GEORGE STREET  
ORLANDO, FL 32814

**Current Mailing Address:**

3617 PERSHING AVENUE  
ORLANDO, FL 32812

**New Mailing Address:**

2976 ST. GEORGE STREET  
ORLANDO, FL 32814

**FEI Number:** 20-1923081

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOCARRAS, RAUL  
233 SOUTH SEMORAN BLVD.  
ORLANDO, FL 32812 US

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

SOCARRAS, RAUL  
233 SOUTH SEMORAN BLVD.  
ORLANDO, FL 32807 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: RAUL SOCARRAS

07/17/2005

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, S ( ) Delete  
Name: SOCARRAS, RAUL  
Address: 3617 PERSHING AVENUE  
City-St-Zip: ORLANDO, FL 32812

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

Title: P, S (X) Change ( ) Addition  
Name: SOCARRAS, RAUL  
Address: 2976 ST. GEORGE STREET  
City-St-Zip: ORLANDO, FL 32814

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAUL SOCARRAS

PRES

07/17/2005

Electronic Signature of Signing Officer or Director

Date