## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148505

Entity Name: MICHELE SHARPE, P.A.

FILED Apr 25, 2007 Secretary of State

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

950 S PINE ISLAND RD 3309 NORTHLAKE BLVD **SUITE 1034** SUITE 207

PLANTATION, FL 33324 PALM BEACH GARDENS, FL 33403

**Current Mailing Address:** New Mailing Address:

3309 NORTHLAKE BLVD 12629 85TH RD. N

WEST PALM BEACH, FL 33412 SUITE 207 PALM BEACH GARDENS, FL 33403

FEI Number: 11-3732390 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Election Campaign Financing Trust Fund Contribution ( ).

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SHARPE, MICHELE SHARPE, MICHELE Name: Name:

12629 85TH RD. N 3309 NORTHLAKE BLVD SUITE 207 Address: Address: City-St-Zip: PLANTATION, FL 33412 City-St-Zip: PALM BEACH GARDENS, FL 33403

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: MICHELE SHARPE **PSTD** 04/25/2007