

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000149728

FILED
Apr 29, 2005
Secretary of State

Entity Name: EVELYN P. ZAMORA, P.A.

Current Principal Place of Business:

835 SW 173RD AVE
PEMPROKE PINES, FL 33029

New Principal Place of Business:

2080 S OCEAN DRIVE
1707
HALLANDALE BEACH, FL 33009

Current Mailing Address:

835 SW 173RD AVE
PEMPROKE PINES, FL 33029

New Mailing Address:

2080 S OCEAN DRIVE
1707
HALLANDALE BEACH, FL 33009

FEI Number: 20-1932798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAMORA, MARCELO A
835 SW 173RD AVE
PEMPROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

ZAMORA, MARCELO A
2080 S OCEAN DRIVE
1707
HALLANDALE BEACH, FL 33009 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: _____

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZAMORA, MARCELO A
Address: 835 SW 173RD AVE
City-St-Zip: PEMPROKE PINES, FL 33029

Title: VS () Delete
Name: ZAMORA, EVELYN P
Address: 835 SW 173RD AVE
City-St-Zip: PEMPROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ZAMORA, MARCELO A
Address: 2080 S. OCEAN DRIVE UNIT 1707
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VS (X) Change () Addition
Name: ZAMORA, EVELYN P
Address: 2080 S. OCEAN DRIVE -UNIT 1707
City-St-Zip: HALLANDALE BEACH, FL 33009

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: MARCELO A ZAMORA

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date