## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000041931

Entity Name: BOSS REPORTING OF WESTON, INC.

FILED Jul 07, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1792 BELL TOWER LANE 515 EAST LAS OLAS BOULEVARD SUITE 100

WESTON, FL 33326 US FORT LAUDERDALE, FL 33301 US

Current Mailing Address: New Mailing Address:

8921 W. OAKLAND PARK BOULEVARD 515 EAST LAS OLAS BOULEVARD

SUNRISE, FL 33351 US SUITE 100

FORT LAUDERDALE, FL 33301 US

FEI Number: 20-2541247 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:

AMIR, O M

101 GRAND PALMS DRIVE

KADOSH, DONNA

515 EAST LAS OLAS BOULEVARD

PEMBROKE PINES, FL 33027 US SUITE 100 FORT LAUDERDALE, FL 33301 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: DONNA KADOSH 07/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: KADOSH, DONNA Name: KADOSH, DONNA

Address: 8921 W. OAKLAND PARK BOULEVARD Address: 515 EAST LAS OLAS BOULEVARD, SUITE 100

City-St-Zip: SUNRISE, FL 33351 US City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: VP ( ) Delete Title: PRES (X) Change ( ) Addition

Name: GUR, MICHELE Name: KADOSH, DONNA

Address: 1792 BELL TOWER LAND SUITE 102 Address: 515 EAST LAS OLAS BOULEVARD, SUITE 100

City-St-Zip: WESTON, FL 33326 US City-St-Zip: FORT LAUDERDALE, FL 33301 US

 $\label{eq:Title: VP ( ) Change (X) Addition} \end{Title:} \qquad \end{Title: VP ( ) Change (X) Addition}$ 

Name: Name: KADOSH, DONNA

Address: 515 EAST LAS OLAS BOULEVARD, SUITE 100

City-St-Zip: City-St-Zip: FORT LAUDERDALE,, FL 33301 US

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: DONNA KADOSH PRES 07/07/2008