

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000057635

FILED  
Apr 18, 2006  
Secretary of State

**Entity Name:** THE LAW OFFICE OF AARON ZMARZLINSKI, P.A.

**Current Principal Place of Business:**

2624 BROMPTON CT.  
ORLANDO, FL 32833 US

**New Principal Place of Business:**

**Current Mailing Address:**

2624 BROMPTON CT.  
ORLANDO, FL 32833 US

**New Mailing Address:**

16877 E. COLONIAL DR.  
# 409  
ORLANDO, FL 32820 US

**FEI Number:** 35-2252882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZMARZLINSKI, AARON  
2624 BROMPTON CT.  
ORLANDO, FL 32833 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D, P ( ) Delete  
Name: ZMARZLINSKI, AARON  
Address: 2624 BROMPTON CT.  
City-St-Zip: ORLANDO, FL 32833 US

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: AARON ZMARZLINSKI

P

04/18/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date