

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113863

Entity Name: N.W. 27TH AVE. CORP.

FILED  
Sep 14, 2006  
Secretary of State

**Current Principal Place of Business:**

320 FLAMINGO ROAD  
SUITE 167  
PEMBROKE PINES, FL 33027

**New Principal Place of Business:**

**Current Mailing Address:**

320 FLAMINGO ROAD  
SUITE 167  
PEMBROKE PINES, FL 33027

**New Mailing Address:**

FEI Number: 20-3351592      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAPIENZA, JULIE  
320 FLAMINGO ROAD  
SUITE 167  
PEMBROKE PINES, FL 33027 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

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: PD ( ) Delete  
Name: SAPIENZA, JULIE  
Address: 320 FLAMINGO ROAD SUITE 167  
City-St-Zip: PEMBROKE PINES, FL 33027

**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: JULIE SAPIENZA

PD

09/14/2006

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

\_\_\_\_\_ Date