


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90071 040 ***158.75

DOCUMENT # P05000145641 1. Entity Name SOURCE AURORA, INC.														
Principal Place of Business 200 2ND AVENUE SOUTH #360 SAINT PETERSBURG, FL 33701		Mailing Address 200 2ND AVENUE SOUTH #360 SAINT PETERSBURG, FL 33701												
2. Principal Place of Business - No P.O. Box # 2407 21ST AVE WEST	3. Mailing Address 2407 21ST AVE WEST													
Suite, Apt. #, etc. 	Suite, Apt. #, etc. 													
City & State BRADENTON FLORIDA	City & State BRADENTON, FLORIDA													
Zip 34205	Country U.S.A.	Zip 34205												
Country U.S.A.	4. FEI Number 90-0250025													
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable												
6. Name and Address of Current Registered Agent FIorenzo, ROXANNE 200 2ND AVENUE SOUTH #360 SAINT PETERSBURG, FL 33701														
7. Name and Address of New Registered Agent Name FIorenzo, ROXANNE Street Address (P.O. Box Number is Not Acceptable) 2407 21ST AVENUE WEST City BRADENTON FL Zip Code 34205														
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____														
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00														
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees														
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">CEO</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>FIorenzo, ROXANNE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>200 2ND AVENUE SOUTH #360</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>SAINT PETERSBURG, FL 33701</td> <td></td> </tr> </table>			TITLE	CEO	<input type="checkbox"/> Delete	NAME	FIorenzo, ROXANNE		STREET ADDRESS	200 2ND AVENUE SOUTH #360		CITY - ST - ZIP	SAINT PETERSBURG, FL 33701	
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">FIorenzo, ROXANNE</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>2407 21ST AVENUE WEST</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>BRADENTON, FL 34205</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	FIorenzo, ROXANNE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	2407 21ST AVENUE WEST		STREET ADDRESS	BRADENTON, FL 34205		CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.														
SIGNATURE: <u>Roxanne Fiorenzo CEO</u> ROXANNE FIORENZO 2-7-2007 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>														



02082007 Chg-P CR2E034 (12/06)

941-746-8945