

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000001634

FILED  
Sep 06, 2007  
Secretary of State

Entity Name: RAFAEL POPA INC.

**Current Principal Place of Business:**

651 NE 27 STREET  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

651-C NE 27 STREET  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

651 NE 27 STREET  
POMPANO BEACH, FL 33064

**New Mailing Address:**

2651 NE 9 TER  
POMPANO BEACH, FL 33064

FEI Number: 20-4057624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POPA, RAFAEL  
112 NW 31 STREET  
MIAMI, FL 33127 US

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

POPA, RAFAEL P  
2651 NE 9 TER.  
POMPANO BEACH, FL 33064 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: RAFAEL POPA

09/06/2007

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: P ( ) Delete  
Name: POPA, RAFAEL  
Address: 112 NW 31 STREET  
City-St-Zip: MIAMI, 33127

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P (X) Change ( ) Addition  
Name: POPA, RAFAEL P  
Address: 2651 NE 9 TER.  
City-St-Zip: POMPANO BEACH, FL 33064

Title: V ( ) Change (X) Addition  
Name: POPA, CRUCITA V  
Address: 2651 NE 9 TER.  
City-St-Zip: POMPANO BEACH, FL 33064

Title: S ( ) Change (X) Addition  
Name: LISZAK, EUGENE J S  
Address: 651-C NE 27 ST.  
City-St-Zip: POMPANO BEACH, FL 33064

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: RAFAEL POPA

P

09/06/2007

Electronic Signature of Signing Officer or Director

Date