

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036395

**FILED**  
**Jul 14, 2007**  
**Secretary of State**

**Entity Name:** MARIA NELLY DA SILVA, P.A.

**Current Principal Place of Business:**

2100 BRICKELL AVE - APT 304  
MIAMI, FL 331292152

**New Principal Place of Business:**

**Current Mailing Address:**

2100 BRICKELL AVE - APT 304  
MIAMI, FL 331292152

**New Mailing Address:**

910 WEST AVENUE  
#528  
MIAMI, FL 33139

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DA SILVA, MARIA NELLY  
2100 BRICKELL AVE - APT 304  
MIAMI, FL 331292152 US

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

DA SILVA, MARIA NELLY  
910 WEST AVENUE  
#528  
MIAMI BEACH, FL 33139 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: MARIA NELLY DA SILVA FIGUEIRA P.A.

07/14/2007

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: PD ( ) Delete  
Name: DA SILVA, MARIA N  
Address: 2100 BRICKELL AVE - APT 304  
City-St-Zip: MIAMI, FL 331292152

**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 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: MARIA NELLY DA SILVA FIGUEIRA P.A.

PD

07/14/2007

Electronic Signature of Signing Officer or Director

Date