

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90039 042 ***150.00

DOCUMENT # P06000063463

1. Entity Name
VIRGINIA R. NODAL P.A.



Principal Place of Business
9856 SW 8TH STREET
211
MIAMI, FL 33174

Mailing Address
9856 SW 8TH STREET
211
MIAMI, FL 33174

60000000



2. Principal Place of Business - No P.O. Box #
1850 SW 121st Court
Suite, Apt. #, etc. **261**

3. Mailing Address
1850 SW 121st Court
Suite, Apt. #, etc. **261**

01122007 Chg-P CR2E034 (12/06)

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number
24-4827982

Applied For
Not Applicable

Zip
33175

Country

Zip
33175

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

NODAL, VIRGINIA R
9856 SW 8TH STREET
211
MIAMI, FL 33174

7. Name and Address of New Registered Agent

Name
NODAL VIRGINIA R.
Street Address (P.O. Box Number is Not Acceptable)
1850 SW 121st Court
Suite 261
City **Miami** FL Zip Code **33175**

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

Signature, typed or printed name of registered agent and title if applicable

(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. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P/S	<input checked="" type="checkbox"/> Delete
NAME	NODAL, VIRGINIA R	
STREET ADDRESS	9856 SW 8TH STREET # 211	
CITY-ST-ZIP	MIAMI, FL 33174	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NODAL, VIRGINIA R.	
STREET ADDRESS	1850 SW 121st Court #261	
CITY-ST-ZIP	Miami, FL 33175	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *X* *Virginia R. Nodal*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/18/07

Date

786-2010785

Daytime Phone #