2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000068992

Entity Name: JAKUB DROZD PA

Current Principal Place of Business:	**New Principal Place of Business:**
4272 NW 89TH AVENUE APT 101 CORAL SPRINGS, FL 33065	2670 E. SUNRISE BLVD. SUITE 417 FORT LAUDERDALE, FL 33304
Current Mailing Address:	**New Mailing Address:**
4272 NW 89TH AVENUE APT 101 CORAL SPRINGS, FL 33065	PO BOX 4758 FORT LAUDERDALE, FL 33338

FEI Number: 20-4877533   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
DROZD, JAKUB 4272 NW 89TH AVE APT 101 CORAL SPRINGS, FL 33065 US	DROZD, JAKUB 2670 E. SUNRISE BLVD. SUITE 417 FORT LAUDERDALE, FL 33304 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: JAKUB DROZD   03/22/2007
_____
             Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:	**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**
Title: P ( ) Delete Name: DROZD, JAKUB Address: 4272 NW 89TH AVE APT 101 City-St-Zip: CORAL SPRINGS, FL 33065	Title: P (X) Change ( ) Addition Name: DROZD, JAKUB Address: 2670 E. SUNRISE BLVD. #417 City-St-Zip: FORT LAUDERDALE, FL 33304

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: JAKUB DROZD   PRES   03/22/2007
_____
             Electronic Signature of Signing Officer or Director   Date