## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000118898

Entity Name: OBER MERINO, P.A.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

27 OLD POST RD 1431 TRACY DEE WAY

LONGWOOD, FL 32779 US LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

27 OLD POST RD 1431 TRACY DEE WAY

LONGWOOD, FL 32779 US LONGWOOD, FL 32779 US

FEI Number: 20-5560862 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:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS, I PROFESSIONAL ACCOUNTANTS & CONSULTANTS INC

 2471 E SEMORAN BLVD
 2471 E SEMORAN BLVD

 APOPKA, FL 32703
 US

 APOPKA, FL 32703
 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: DANIEL ALVAREZ 04/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: PTS ( ) Delete Title: PTS (X) Change ( ) Addition

 Name:
 MERINO, OBER
 Name:
 MERINO, OBER

 Address:
 27 OLD POST RD
 Address:
 1431 TRACY DEE WAY

 City-St-Zip:
 LONGWOOD, FL 32779 US
 City-St-Zip:
 LONGWOOD, FL 32779 US

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: OBER MERINO PTS 04/27/2007

Electronic Signature of Signing Officer or Director

Date