

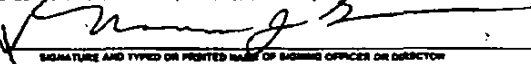
FILED
May 03, 2007 8:00 am
Secretary of State

03-16-2007 90041 039 ****50.00

04-16-2007 90061 044 ****100.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

3/

DOCUMENT # P06000146412			
1. Entity Name NORMA JORGE, P.A.			
Principal Place of Business 1600 S OCEAN BLVD UNIT 1002 LAUDERDALE BY THE SEA, FL 33062		Mailing Address 1600 S OCEAN BLVD UNIT 1002 LAUDERDALE BY THE SEA, FL 33062	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FFI Number 20-5929009		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JORGE, NORMA 1600 S OCEAN BLVD UNIT 1002 LAUDERDALE BY THE SEA, FL 33062		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, name or printed name of registered agent and also if applicable (NOTE: Registered Agent signature required when reappointing) 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D JORGE, NORMA 1600 S OCEAN BLVD UNIT 1002 LAUDERDALE BY THE SEA, FL 33062 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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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 007, 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: 		Date 3/13/07 Divisions Phone 8	