

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000085871

FILED
Apr 19, 2007
Secretary of State

Entity Name: KIM T. MOLLIKA, P.A.

Current Principal Place of Business:

400 S. DIXIE HWY
110
BOCA RATON, FL 33432 US

New Principal Place of Business:

1861 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

PO BOX 272825
SUITE 455
BOCA RATON, FL 33427 US

New Mailing Address:

PO BOX 272825
BOCA RATON, FL 33427 US

FEI Number: 65-0455072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLLIKA, KIM T.
400 S. DIXIE HWY.
SUITE 110
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

MOLLIKA, KIM T.
1861 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 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: KIM T MOLLIKA RA

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOLLIKA, KIM T
Address: 400 S. DIXIE HWY.
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOLLIKA, KIM T
Address: 1861 UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

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: KIM T MOLLIKA PRESIDENT

P

04/19/2007

Electronic Signature of Signing Officer or Director

Date