


2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000037334	
1. Entity Name JOSE ARRUDA BARBOSA, P.A.	

Principal Place of Business % 904 WEST HALLANDALE BEACH BLVD. HALLANDALE, FL	Mailing Address % 904 WEST HALLANDALE BEACH BLVD. HALLANDALE, FL
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05032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 66-0500941	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KLISTON, TODD W E 8211 W. BROWARD BLVD #375 PLANTATION, FL 33324

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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: *Jose Arruda Barbosa PA* DATE: *5/2/2007*

Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-appointing)

**FILE NOW!!! FEE IS \$150.00
 Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BARBOSA, JOSE A % 904 W. HALLANDALE BEACH BLVD. HALLANDALE, FL
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 05/25/07-80085-011 150.00

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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 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: *Jose Arruda Barbosa PA* DATE: *5/2/2007*

Signature and typed or printed name of signing officer or director

JOSE ARRUDA BARBOSA PA (954) 458-3040