


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000067581
 1. Entity Name
 FELIX J. SUBERVI, III, P.A.



Principal Place of Business: 15025 MEADOWLAKE STREET, ODESSA, FL 33556
 Mailing Address: 15025 MEADOWLAKE STREET, ODESSA, FL 33556

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04122007 No Chg-P CR2E034 (11/05)

4. FEI Number: 59-3396765 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SUBERVI, FELIX J III
 15025 MEADOWLAKE STREET
 ODESSA, FL 33556

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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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

00000707717
 04/24/07-80085-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SUBERVI, FELIX J III
STREET ADDRESS	15025 MEADOWLAKE STREET
CITY-ST-ZIP	ODESSA, FL 33556
TITLE	ST
NAME	MILAGROS, SUBERVI
STREET ADDRESS	15025 MEADOWLAKE ST.
CITY-ST-ZIP	ODESSA, FL 33556
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Felix J. Subervi 4/14/07 Date
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR