

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2008**  
**Secretary of State**

DOCUMENT# P97000003241

Entity Name: SONIA NARVAEZ, CPA, PA

**Current Principal Place of Business:**

**New Principal Place of Business:**

1813 N DEAN RD  
SUITE 104  
ORLANDO, FL 32817

**Current Mailing Address:**

**New Mailing Address:**

1813 N DEAN RD  
SUITE 104  
ORLANDO, FL 32817

FEI Number: 59-3420712

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:**

NARVAEZ, SONIA E  
2439 BRIXHAM AVE  
ORLANDO, FL 32828 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

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

Title: D ( ) Delete  
Name: NARVAEZ, SONIA E  
Address: 2439 BRIXHAM AVE  
City-St-Zip: ORLANDO, FL 32828

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SONIA E NARVAEZ

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04/16/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date