

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027245

Entity Name: BONA FINANCIAL GROUP, INC.

FILED  
Mar 25, 2005  
Secretary of State

## Current Principal Place of Business:

28100 US 19 NORTH  
SUITE 301  
CLEARWATER, FL 33761 US

## Current Mailing Address:

28100 US 19 NORTH  
SUITE 301  
CLEARWATER, FL 33761 US

## New Principal Place of Business:

25400 US 19 NORTH  
SUITE 192  
CLEARWATER, FL 33763 US

## New Mailing Address:

25400 US 19 NORTH  
SUITE 192  
CLEARWATER, FL 33763 US

FEI Number: 65-1026395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BONA, RAFAEL G  
1694 BAYHILL DRIVE  
OLDSMAR, FL 34677 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: BONA, RAFAEL  
Address: 1694 BAYHILL DRIVE  
City-St-Zip: OLDSMAR, FL 34677

Title: VP ( ) Delete  
Name: CLEDERA-BONA, IRIS M  
Address: 1694 BAYHILL DRIVE  
City-St-Zip: OLDSMAR, FL 34677

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAFAEL BONA

P

03/25/2005

Electronic Signature of Signing Officer or Director

Date