

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000046924

Entity Name: YVETTE MACIAS, P.A.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

5900 SW 73 STREET
SUITE 304
MIAMI, FL 33143

Current Mailing Address:

5900 SW 73 STREET
SUITE 304
MIAMI, FL 33143

New Principal Place of Business:

2151 LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134

New Mailing Address:

2151 LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134

FEI Number: 65-0814168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACIAS, YVETTE
5900 SW 73 STREET
SUITE 304
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

MACIAS, YVETTE
2151 LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134 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:

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MACIAS, YVETTE
Address: 8030 LOS PINOS BLVD.
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MACIAS, YVETTE
Address: 2151 LE JEUNE ROAD, SUITE 202
City-St-Zip: CORAL GABLES, FL 33134

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: YVETTE MACIAS

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date