


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 08, 2007 08:00 AM
Secretary of State**

DOCUMENT # P97000058530 1. Entity Name NUJIM NEPOMECHIE, P.A.	
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Principal Place of Business 1805 ESPANOLA DRIVE COCONUT GROVE, FL 33133	Mailing Address 1805 ESPANOLA DRIVE COCONUT GROVE, FL 33133
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DO NOT WRITE IN THIS SPACE



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0766644	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**NEPOMECHIE, NUJIM
1805 ESPANOLA DRIVE
COCONUT GROVE, FL 33133**

**DO NOT WRITE
IN THIS SPACE**

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. <input type="checkbox"/> \$5.00 May Be Added to Fee	000000579140 01/09/07-80058-005 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSVD NEPOMECHIE, NUJIM 1805 ESPANOLA DRIVE COCONUT GROVE, FL 33133
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 reports 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 affidavit with all other like empowered.

SIGNATURE:  **NUJIM NEPOMECHIE, PSVD** **01/03/2007 (305) 856-6496**
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #