2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000095729

Entity Name: MARLENE POLLACK, P.A.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

905 BRICKELL BAY DR. #227, TOWER 2 LOBBY MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

905 BRICKELL BAY DR. #227, TOWER 2 LOBBY MIAMI, FL 33131

FEI Number: 65-0795672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

POLLACK, MARLENE G

905 BRICKELL BAY DR.

#227, TOWER 2 LOBBY

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BACKMAN, MARLENE P 905 BRICKELL BAY DR. #227, TOWER 2 LOBBY MIAMI, FL 33131 US

MIAMI, FL 33131 US

MIAMI, FL 33131 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: MARLENE GAIL POLLACK 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS () Delete Title: PDS (X) Change () Addition

 Name:
 BACKMAN, MARLENE P
 Name:
 POLLACK, MARLENE P

 Address:
 15070 SW 16TH ST
 Address:
 17 SCENIC VIEW DRIVE

 City-St-Zip:
 PEMBROKE PINES, FL 33027
 City-St-Zip:
 WEAVERVILLE, NC 28787

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: MARLENE GAIL POLLACK O/D 04/26/2007