## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000100549

2700 NW 33 STREET

POMPANO BEACH, FL 33069

Address: City-St-Zip:

Entity Name: 2201 POMPANO, INC.

FILED Jan 29, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2201 NW 16 ST POMPANO BEACH, FL 33069 **Current Mailing Address: New Mailing Address:** 2700 NW 27 AVENUE 1730 S FEDERAL HWY SUITE 284 POMPANO BEACH, FL 33069 DELRAY BEACH, FL 33483 FEI Number: 65-0796445 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UHEL, POLLY 2700 NW 33 STREET US POMPANO BEACH, FL 33069 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: () Delete Title: () Change () Addition POLLY, UHEL Name: Name: 2700 NW 33 ST Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: Title: Title: () Change () Addition () Delete BIANCHINI, JASON Name: Name: 2700 NW 33 STREET Address: Address: POMPANO BEACH, FL 33069 City-St-Zip: City-St-Zip: Title: VSD Title: ( ) Delete () Change () Addition POLLY, LINDA Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: LINDA POLLY VSD 01/29/2007