2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000025279

1. Entity Name

JACQUELINE ALBARRAN ARCHITECT P.A.



FILED Apr 17, 2008 08:00 A Secretary of State

Principal Place of Business

12765 FOREST HILL BLVD.

SUITE 1302 WELLINGTON, FL 33480 Mailing Address

12765 FOREST HILL BLVD SUITE 1302

WELLINGTON, FL 33414



02282008

No Cha-P

CR2E034 (11/05)

4. FEI Number 65-6325442

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

MARIO G. DE MENDOZA, III, P.A. 12765 FOREST HILL BLVD. SUITE 1302 WELLINGTON, FL 33414

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					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	<u> </u>
10.	OFFICERS AND DIREC	CTORS			U4730708-80036-011 150,00
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PSTD ALBARRAN, JACQUELINE 12765 FOREST HILL BLVD., SUITE 1 WELLINGTON, FL 33414	302			1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DE MENDOZA, MARIO G III 12765 FOREST HILL BLVD., SUITE 1302 WELLINGTON, FL 33414				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME					

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 report 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 address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Jacque line Albarran, President

3/18/08

(561)655-7676 Daytime Phone #