## **2008 FOR PROFIT CORPORATION**

## Apr 03, 2008 08:00 Al Secretary of State **ANNUAL REPORT** DOCUMENT # P98000032263 LAW OFFICE OF NILO J. SANCHEZ, JR., P.A. Principal Place of Business Mailing Address 1006 N. ARMENIA AVE 1006 N. ARMENIA AVE TAMPA, FL 33607 TAMPA, FL 33607 03082008 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3372401 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANCHEZ, NILO J JR DO NOT WRITE 1006 N. ARMENIA AVENUE TAMPA, FL 33607 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 1000000204/15/08-80033-022 150.00 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE SANCHEZ, NILO J JR. NAME STREET ADDRESS 1006 N. ARMENIA AVE CITY-ST-ZIP TAMPA, FL 33607 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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:

STREET ADDRESS CITY-ST-ZIP

**FILED**