

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094364

Entity Name: BORMAR AGENCY, CORP.

FILED
Jul 09, 2007
Secretary of State

Current Principal Place of Business:

16463 NE 6 AVE
N.MIAMI BEACH, FL 33162 US

New Principal Place of Business:

691 NORTH STATE ROAD7
HOLLYWOOD, FL 33021 US

Current Mailing Address:

16463 NE 6 AVE
N.MIAMI BEACH, FL 33162 US

New Mailing Address:

691 NORTH STATE ROAD7
HOLLYWOOD, FL 33021 US

FEI Number: 65-0872567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABEL, GILLES
16463 NE 6 AVE
N.MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

ABEL, GILLES
691 NORTH STATE ROAD7
HOLLYWOOD, FL 33021 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: ABEL GILLES

07/09/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GILLES, ABEL
Address: 16463 NE 6 AVE
City-St-Zip: N.MIAMI BEACH, FL 33162 US

Title: VP () Delete
Name: GILLES, MARIE S
Address: 16463 NE 6 AVE
City-St-Zip: N.MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GILLES, ABEL
Address: 691 NORTH STATE ROAD7
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VP (X) Change () Addition
Name: GILLES, MARIE S
Address: 691 NORTH STATE ROAD7
City-St-Zip: HOLLYWOOD, FL 33021

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: MARIE SONIA GILLES

VP

07/09/2007

Electronic Signature of Signing Officer or Director

Date