

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003618

Entity Name: AURORA REPUBLIC, INC.

FILED  
Jan 31, 2005  
Secretary of State

**Current Principal Place of Business:**

10205NW7AVE  
MIAMI, FL 33150

**New Principal Place of Business:**

**Current Mailing Address:**

10205NW7AVE  
MIAMI, FL 33150

**New Mailing Address:**

FEI Number: 65-0890914      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOPAUL, ROBERT  
10205 NW 7AVE  
MIAMI, FL 33150      US

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

HENRY, ROBERT  
10205 NW 7AVE  
MIAMI, FL 33150      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: HENRY ROBERT      01/31/2005  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: SINGH, LARRY  
Address: 10205NW7AVE  
City-St-Zip: MIAMI, FL 33150

Title: P      ( ) Delete  
Name: GOPAUL, ROBERT  
Address: 10205NW7AVE  
City-St-Zip: MIAMI, FL 33150

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: SINGH, LINDA  
Address: 10205NW7AVE  
City-St-Zip: MIAMI, FL 33150

Title: D      ( ) Change (X) Addition  
Name: SINGH, AGNES  
Address: 10205 NW 7 AVE  
City-St-Zip: MIAMI, FL 33150

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LINDA SINGH      D      01/31/2005  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date