


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000003624		
1. Entity Name LAW OFFICE OF RAY CHRISTOPHER LOPEZ, P.A.		

FILED
05 OCT 14 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 406 N MORGAN STREET TAMPA, FL 33602	Mailing Address 406 N MORGAN STREET TAMPA, FL 33602
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



07162005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3569865	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
LOPEZ, RAY C 406 N MORGAN STREET TAMPA, FL 33602	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOPEZ, RAY C 406 N MORGAN STREET TAMPA, FL 33602 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10/14/05--01068--010 ***150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 a power like empowered.

SIGNATURE: 	Ray C. Lopez	10/6/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date

LAW OFFICE OF RAY CHRISTOPHER LOPEZ, PA
207 WEST PLATT STREET
TAMPA, FL 33606
(813)221-4455

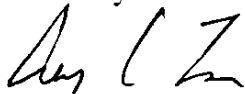
To: Division of Corporations
From: Ray C. Lopez, PA
Re: 2005 For Profit Corporation Annual Report
Date: Oct 6, 2005

Please note that our corporation moved to a new address as of January 1, 2005. The enclosed notice was not received to us at our new address. It was sent to our old address on Morgan St. and never forwarded.

I recently received a phone call from the law firm that currently resides at our former address to tell me that there were several articles of mail addressed to the my firm at their office. The attached form was among these items.

I have made a phone call to your office in regards to the above. I was told to send in the form along with a check for the \$150 amount, along with an explanation. Also, could you please correct our address as specified on the letterhead.

Thank-you.

A handwritten signature in black ink, appearing to read 'Ray C. Lopez'.

Ray C. Lopez