

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # S21445

1. Entity Name

TERMINELLO & TERMINELLO, P.A.



Principal Place of Business

2700 S.W. 37 AVENUE
MIAMI, FL 33133-2728

Mailing Address

2700 S.W. 37 AVENUE
MIAMI, FL 33133-2728

FILED

06 MAR -3 PM 12:34

SECRET
TALLAHASSEE, FLORIDA



03012006 No Chg-P CR2E034 (11/05)

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4. FEI Number

65-0235814

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TERMINELLO, LOUIS J., ESQ.
2700 SW 37TH AVE.
MIAMI, FL 33133

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
TERMINELLO, LOUIS J.
2700 SW 37TH AVE
MIAMI, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSD
TERMINELLO, NANCY
2700 SW 37TH AVE.
MIAMI, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

600067973976
03/16/06--01017--030 **150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #