## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V14289

FILED Jan 06, 2006 Secretary of State

Entity Name: ARIEL A. LORIE ACCOUNTING SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1010 S. OCEAN BLVD PH 06 POMPANO BEACH, FL 33062 US **Current Mailing Address: New Mailing Address:** 1010 S. OCEAN BLVD PH 06 POMPANO BEACH, FL 33062 US FEI Number: 65-0313681 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LORIE, ARIEL A 1010 S OCEAN BLVD PH 06 POMPANO BEACH, FL 33062 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition LORIE, ARIEL A., LORIE, ARIEL A., Name: Name: 1010 S. OCEAN BLVD PH#6 18876 LACOSTA LANE Address: Address: City-St-Zip: BOCA RATON, FL City-St-Zip: POMPANO, FL 33062 Title: **VPS** Title: () Change () Addition () Delete Name: LORIE. ARIEL Name: 3506 MOONBAY CIR Address: Address: WELLINGTON, FL 33414 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ARIEL A. LORIE **PRES** 01/06/2006