

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V57021

FILED  
Jan 09, 2010  
Secretary of State

**Entity Name:** LOUIS L. ZALL PROFESSIONAL ASSOCIATION

**Current Principal Place of Business:**

8320 W SUNRISE BLVD  
SUITE 210  
PLANTATION, FL 33322 US

**New Principal Place of Business:**

**Current Mailing Address:**

8320 W SUNRISE BLVD  
SUITE 210  
PLANTATION, FL 33322 US

**New Mailing Address:**

**FEI Number:** 65-0351614      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ZALL, LOUIS L DR  
8320 W SUNRISE BLVD  
SUITE 210  
FT. LAUDERDALE, FL 33322 US

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

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:**

Title: DR  
Name: ZALL, LOUIS L DR  
Address: 8320 W SUNRISE BLVD, SUITE 210  
City-St-Zip: PLANTATION, FL 33320

I hereby 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 all other like empowered.

SIGNATURE: LOUIS L. ZALL

PRES

01/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date