

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 495948

1. Entity Name
FORD, DEAN & MALLARD, P.A.



Principal Place of Business
**9130 S. DADELAND BLVD.
TWO DATRAN CENTER, PENTHOUSE 1-C
MIAMI, FL 33156 US**

Mailing Address
**9130 S. DADELAND BLVD.
TWO DATRAN CENTER, PENTHOUSE 1-C
MIAMI, FL 33156 US**

FILED
May 01, 2006 08:00 AM
Secretary of State



04232006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1651169

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**FORD, T. PATRICK, JR.
9130 S DADELAND BLVD
PENTHOUSE 1-C
MIAMI, FL 33156**

**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 item # applicable.

(NOTE: Registered Agent signature required when reissuing)

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
**PD
FORD, T. PATRICK, JR.
9510 S.W. 136 ST.
MIAMI, FL 33176**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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U00000555424
05/16/06-80020-019 150.00

**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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

T. PATRICK FORD, Sr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/06 305-670-2000
DATE DAYTIME PHONE #