

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 06, 2005 08:00 AM
Secretary of State

DOCUMENT # F24880

1. Entity Name
J. MAURICE FINKEL, P.A.



Principal Place of Business

**28 W FLAGLER STREET
#330
MIAMI, FL 33130 US**

Mailing Address

**28 W FLAGLER STREET
#330
MIAMI, FL 33130 US**



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2097182

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FINKEL, J MAURICE
28 W FLAGLER ST
SUITE 330
MIAMI, FL 33130**

**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, 2005 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 | P FINKEL, SETH L 28 W. FLAGLER ST., #330 MIAMI, FL 33130 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | T FINKEL, J. M. 28 W. FLAGLER ST., #330 MIAMI, FL 33130 |
| 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 | |

U00000172750
01/06/05-80011-014 150.00

**DO NOT WRITE
IN THIS SPACE**

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 all other like empowered.

SIGNATURE:

1/4/05