

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # J97226  
 1. Entity Name  
 13 SW SEVENTH STREET CORP.



Principal Place of Business      Mailing Address  
 13 S.W. 7TH STREET      13 S.W. 7TH STREET  
 MIAMI, FL 33130      MIAMI, FL 33130

**DO NOT WRITE IN THIS SPACE**



01062006    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
 65-0008703      Not Applicable

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

6. Name and Address of Current Registered Agent  
 LATTERNER, MICHAEL  
 13 S.W. 7TH STREET  
 MIAMI, FL 33130

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**      9. Election Campaign Financing      **\$5.00** May Be  
**After May 1, 2006 Fee will be \$550.00**      Trust Fund Contribution.            Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DISKIN, JACK
STREET ADDRESS	% 13 S.W. 7TH STREET
CITY-ST-ZIP	MIAMI, FL 33130
TITLE	D
NAME	SCHORNSTEIN, DAVE W
STREET ADDRESS	% 13 S.W. 7TH STREET
CITY-ST-ZIP	MIAMI, FL 33130
TITLE	D
NAME	RAWICZ, FRED
STREET ADDRESS	% 13 S.W. 7TH STREET
CITY-ST-ZIP	MIAMI, FL 33130
TITLE	D
NAME	LATTERNER, RUTH
STREET ADDRESS	% 13 S.W. 7TH STREET
CITY-ST-ZIP	MIAMI, FL 33130
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 entries.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_