


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90057 035 ***150.00

DOCUMENT # P00000094531
 1. Entity Name
SCHWARTZ INVESTMENTS, INC.



Principal Place of Business Mailing Address
3960 OAKS CLUB HOUSE DR, APT 307 **3960 OAKS CLUB HOUSE DR, APT 307**
POMPANO BEACH, FL 33069 **POMPANO BEACH, FL 33069**

40045066



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| 2. Principal Place of Business 3230 Stirling Road Suite, Apt. #, etc. Suite 1 City & State Hollywood, FL Zip 33021 Country U.S. | | 3. Mailing Address 3230 Stirling Road Suite, Apt. #, etc. Suite 1 City & State Hollywood, FL Zip 33021 Country U.S. | |
|--|--|--|--|

03152005 Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-1047085 | Applied For <input type="checkbox"/> Not Applicable |
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
SCHWARTZ, JOSEPH
3960 OAKS CLUB HOUSE DR, APT 307
POMPANO BEACH, FL 33069

7. Name and Address of New Registered Agent
 Name **Morris Engelberg, Esquire**
 Street Address (P.O. Box Number is Not Acceptable)
3230 Stirling Road
Suite 1
 City **Hollywood** **FL** Zip Code **33021**

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 *Linda G. Procutain* DATE 3-15-05
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
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 | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVPT SCHWARTZ, JOSEPH 3960 OAKS CLUB HOUSE DR, APT 307 POMPANO BEACH, FL 33069 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Deceased <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPAS ROSENBAUM, LINDA G 3230 STIRLING ROAD, SUITE 1 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T Same <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DSAT BORNSTEIN, ARLENE G 3230 STIRLING ROAD, SUITE 1 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP Same <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: *Linda G. Procutain* Date 3-15-05 Daytime Phone # 984-966-3900
SCHWARTZ INVESTMENTS, INC.,
 General Partner