## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **Secretary of State** 02-25-2005 90153 017 \*\*\*150.00 **DOCUMENT # P01000107422** CARÓLINA B. FRIEDHOFFF, P.A. 40023411 Principal Place of Business Mailing Address 100 SE 2ND STREET 17TH FLOOR 100 SE 2ND STREET 17TH FLOOR MIAMI, FL 33131 MIAMI, FL 33131 3. Mailing Address 2. Principal Place of Business John H. Friedhoff, Esquire John H. Friedhoff, Esquire Fowler White Burnett P.A. Fowler White Burnett P.A. 02022005 Chg-P CR2E034 (10/03) Espirito Santo Plaza - 14th Floor. Espirito Santo Plaza - 14th Floor 4. FEI Number Applied For Fourteenth Floor Fourteenth Floor 65-1152425 Not Applicable 1395 Brickell Avenue 1395 Brickell Avenue \$8.75 Additional 5. Certificate of Status Desired Miami, Florida 33131-3302 Miami, Florida 33131-3302 Fee Required me and Address of New Registered Agent 6. Name and Address of Current Registered Agent John H. Friedhoff, Esquire Name Fowler White Burnett P.A. FRIEDHÖFF, JOHN H Street Ac Espirito Santo Plaza - 14th Floor 100 SE 2ND STREET 17TH FLOOR MIAMI, FL 33131 Fourteenth Floor 1395 Brickell Avenue Miami, Florida 33131-3302 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 ag SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Signature, type of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Added to Fees Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition ☐ Change TITLE **PSTD** Delete TITLE FRIEDHOFF, CAROLINA B NAME NAME 7901 LUDLAM ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SOUTH MIAMI, FL 33143 ☐ Change Addition ☐ Delete TIFLE TITLE FRIEDHOFF, JOHN H NAME NAME 1395 Beickell AUELUE, 14th Hoof STREET ADDRESS STREET ADDRESS 100 SE-SECOND ST: 17TH FLOOR CITY-ST-ZIP MIAMI\_EL\_33131 <u>33(31 - 330 D</u> CITY-ST-7IP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP \* CITY-ST-ZIP ☐ Addition Delete TITLE MILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-7IP 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 address, with all other like empowered. ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone (

FILED Feb 25, 2005 8:00 am