

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000018739**

1. Entity Name  
 LAURA J. INTERDONATI, P.A.



Principal Place of Business  
 120 SOUTH OLIVE AVENUE  
 304  
 W. PALM BCH, FL 33401

Mailing Address  
 120 SOUTH OLIVE AVENUE  
 SUITE 304  
 W. PALM BCH, FL 33401



04142005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 04-3615994 Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

INTERDONATI, LAURA J  
 120 SOUTH OLIVE AVENUE  
 SUITE 304  
 W. PALM BCH, FL 33401

**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 D  
 NAME INTERDONATI, LAURA J  
 STREET ADDRESS 120 SOUTH OLIVE AVENUE, SUITE 304  
 CITY-ST-ZIP W. PALM BCH, FL 33401

TITLE  
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00000309326  
 04/16/05-80032-011 150.00

**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)(f), 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: Laura J. Interdonati 4/14/05 861 655 4888  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #