2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041029

Entity Name: ROBERT J. DORN, P.A.

FILED May 02, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

10001 W OAKLAND PARK BLVD. 7815 WEST COMMERCIAL BOULEVARD

SUITE 202 TAMARAC, FL 33351 SUNRISE, FL 33324

Current Mailing Address: New Mailing Address:

10001 W OAKLAND PARK BLVD. 7815 WEST COMMERCIAL BOULEVARD

SUITE 202 TAMARAC, FL 33351 SUNRISE, FL 33324

FEI Number: 11-3672896 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DORN, ROBERT J
10001 W OAKLAND PARK BLVD.

DORN, ROBERT J
7815 WEST COMMERCIAL BOULEVARD

SUITE 202 TAMARAC, FL 33351 US SUNRISE, FL 33324 US

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.

SIGNATURE: 05/02/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete Title: PVST (X) Change () Addition

Name: DORN, ROBERT J Name: DORN, ROBERT J

Address: 10001 W OAKLAND PARK BLVD. #202 Address: 7815 WEST COMMERCIAL BOULEVARD

City-St-Zip: SUNRISE, FL 33324 City-St-Zip: TAMARAC, FL 33351

Name: DORN, ROBERT J Name: DORN, ROBERT J

Address: 10001 W OAKLAND PARK BLVD. #202 Address: 7815 WEST COMMERCIAL BOULEVARD

City-St-Zip: SUNRISE, FL 33324 City-St-Zip: TAMARAC, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. DORN MR. 05/02/2005