

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063389

**FILED**  
**Apr 25, 2005**  
**Secretary of State**

**Entity Name:** CRAIG DERNIS, P.A.

**Current Principal Place of Business:**

2450 NE MIAMI GARDENS DR 2 FLR  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

2450 NE MIAMI GARDENS DR 2 FLR  
AVENTURA, FL 33180

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DERNIS, CRAIG  
2450 NE MIAMI GARDEN DR  
SECOND FLOOR  
AVENTURA, FL 33180 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DERNIS, CRAIG  
Address: 2450 NE MIAMI GARDENS DR 2 FLR  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CRAIG DERNIS

D

04/25/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date