2007 FOR PROFIT CORPORATION

CITY-ST-ZIP

SIGNATURE:

12. I hereby certify that the information supindicated on this report or suppleme of the corporation or the receiver or t changed, or on an attachment wit

May 01, 2007 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P04000106012 1. Entity Name JACK STUDNICKY, PA Principal Place of Business Mailing Address 6301 COLLINS AVENUE #2201 6301 COLLINS AVENUE #2201 MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141 No Chg-P CR2E034 (11/05) 04282007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 55-0878094 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LIPSON, STUART A DO NOT WRITE **16900 NE 19TH AVENUE** N. MIAMI BEACH, FL 33162 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. 1 am famillar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE D STUDNICKY, JOHN P NAME STREET ADDRESS 6301 COLLINS AVENUE #2201 CITY-ST-ZIP MIAMI BEACH, FL 33141 000000750536 05/18/07-80067-004 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information are under and that my signature shall have the same legal effect as if made under eath; that I am an officer or director expute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11

FILED