

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05237

FILED  
Sep 15, 2006  
Secretary of State

Entity Name: JOHNSON, MIRMIRAN & THOMPSON, INC.

**Current Principal Place of Business:**

72 LOVETON CIRCLE  
SPARKS, MD 21152

**New Principal Place of Business:**

**Current Mailing Address:**

72 LOVETON CIRCLE  
SPARKS, MD 21152

**New Mailing Address:**

FEI Number: 52-0963531      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MILLER, JON D  
615 CRESCENT EXECUTIVE COURT  
SUITE 106  
LAKE MARY, FL 32746 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: MIRMIRAN, FRED M MR.  
Address: 72 LOVETON CIRCLE  
City-St-Zip: SPARKS, MD 21152 US

Title: D ( ) Delete  
Name: BURKE, REGIS MR.  
Address: 72 LOVETON CIRCLE  
City-St-Zip: SPARKS, MD 21152 US

Title: V ( ) Delete  
Name: CHENG, DANIEL T MR.  
Address: 72 LOVETON CIRCLE  
City-St-Zip: SPARKS, MD 21152 US

Title: V ( ) Delete  
Name: SMULOVITZ, RICHARD MR.  
Address: 72 LOVETON CIR  
City-St-Zip: SPARKS, MD 21152 US

Title: V ( ) Delete  
Name: JOHN, MOELLER A MR.  
Address: 72 LOVETON CIRCLE  
City-St-Zip: SPARKS, MD 21152 US

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

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

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

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

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

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 Chapter 119, 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: RICHARD SMULOVITZ

V

09/15/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date