

2008 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 20, 2008 8:00 am
Secretary of State

02-29-2008 90027 048 ***138.75
03-20-2008 90032 047 ****11.25

DOCUMENT # P06000031778 1. Entry Name ROMINA RUBINOWICZ P.A.					
Principal Place of Business 3300 NE 191 ST. 1012 AVENTURA, FL 33180 US			Mailing Address 3300 NE 191 ST. 1012 AVENTURA, FL 33180 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-4442065	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> \$8.75 Additional Fee Required <input checked="" type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent RUBINOWICZ, ROMINA 3300 NE 191 ST. 1012 AVENTURA, FL 33180			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
	P.	RUBINOWICZ, ROMINA	3300 NE 191 ST. SUIT 1012		SECRETARY
		AVENTURA, FL 33180			MARIANO KARNER
					3300 NE 191 ST - STE 1012
					AVENTURA, FL 33180
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____			2/14/08 Date		

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