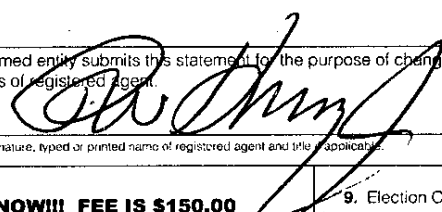
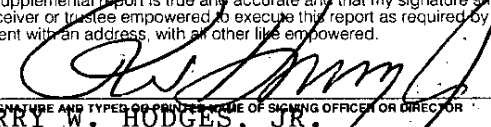


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90075 032 ***150.00

DOCUMENT # P93000012598																	
1. Entity Name PERRY W. HODGES, JR., P.A.																	
Principal Place of Business 1401 E BROWARD BLVD STE 300 FORT LAUDERDALE, FL 33301-2116			Mailing Address 1401 E BROWARD BLVD STE 300 FORT LAUDERDALE, FL 33301-2116														
2. Principal Place of Business			3. Mailing Address														
Suite, Apt. #, etc.			Suite, Apt. #, etc.														
City & State			City & State														
Zip		Country		Zip													
Country		Country		Country													
4. FEI Number 65-0395697				Applied For ☐ Not Applicable													
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required													
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent														
HODGES, PERRY W JR. 644 SE 4 AVE FT LAUDERDALE, FL 33304			Name Street Address (P.O. Box Number is Not Acceptable) 1401 E. Broward Blvd., #300 City Ft. Lauderdale FL Zip Code 33301-2116														
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 reinstating) DATE																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00																	
9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees																	
10. OFFICERS AND DIRECTORS																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;"> TITLE PS NAME HODGES, PERRY W JR. STREET ADDRESS 1401 E BROWARD BLVD 300 CITY-ST-ZIP FORT LAUDERDALE, FL 333012116 </td> <td style="width:50%; padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> </table>						TITLE PS NAME HODGES, PERRY W JR. STREET ADDRESS 1401 E BROWARD BLVD 300 CITY-ST-ZIP FORT LAUDERDALE, FL 333012116	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 an other like empowered.																	
SIGNATURE:  3-21-05 954-462-1431																	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #																	