


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 05, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000046921
1. Entity Name
JEFFREY HOMER, P.A.



Principal Place of Business Mailing Address
7931 SW 45TH ST 7931 SW 45TH ST
DAVIE, FL 33328 DAVIE, FL 33328

DO NOT WRITE IN THIS SPACE



01032005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0589484 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOMER, JEFFREY
7931 SW 45TH ST
DAVIE, FL 33328

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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. 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 Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HOMER, JEFFREY
STREET ADDRESS	7931 SW 45TH ST
CITY-ST-ZIP	DAVIE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/06/05-80001-002 150.00

**DO NOT WRITE
IN THIS SPACE**

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 all other like empowered.

SIGNATURE: Jeffrey Homer Date: Jan. 3 2005 Daytime Phone #: 954-475-1139