

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 08, 2004 8:00 am**  
**Secretary of State**

03-08-2004 90025 035 \*\*\*150.00

DOCUMENT # P98000027392  
 1. Entity Name  
 ALBERT E. DOTSON, JR., P.A.



Principal Place of Business      Mailing Address  
 200 S BISCAYNE BLVD      200 S BISCAYNE BLVD  
 STE 2500      STE 2500  
 MIAMI, FL 33131-2336      MIAMI, FL 33131-2336



02132004      No Chg-P      CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
 65-0821908      Not Applicable

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

6. Name and Address of Current Registered Agent  
 DOTSON, ALBERT E JR  
 200 SOUTH BISCAYNE BLVD SUITE 2500  
 MIAMI, FL 33131-2336

**DO NOT WRITE 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, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	DOTSON, ALBERT E JR
STREET ADDRESS	200 S BISCAYNE BLVD STE 2500
CITY - ST - ZIP	MIAMI, FL 331312336
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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 create 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: Albert Dotson Pres      3/1/04      305-374-7580  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #