

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2005 8:00 am
Secretary of State

03-22-2005 90010 046 ***150.00

40036055



03092005 No Chg-P CR2E034 (10/03)

4. FEI Number **65-0937645** Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RODRIGUEZ, GLADYS
770 S DIXIE HIGHWAY
SUITE 200
CORAL GABLES, FL 33146

**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 _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	FLUXMAN, LEONARD
STREET ADDRESS	770 S DIXIE HIGHWAY SUITE 200
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	V
NAME	LAZARUS, STEPHEN
STREET ADDRESS	770 S DIXIE HIGHWAY SUITE 200
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	VS
NAME	BOEHM, ROBERT C
STREET ADDRESS	770 S DIXIE HWY. STE. 200
CITY-ST-ZIP	MIAMI, FL 33146
TITLE	V
NAME	LAZAR, ROBERT
STREET ADDRESS	770 S DIXIE HWY., STE. 200
CITY-ST-ZIP	MIAMI, FL 33146
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 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: Robert C. Boehm, V.S. 305.358.9002 Ext. 288
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #