2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 8:00 am
Secretary of State
04-07-2006 90026 033 ***150.00

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1. Entity Name
SHAPIRO, BLASI, WASSERMAN & GORA, P.A.

Principal Place of Business	Mailing Address
7777 GLADES RD SUITE 110 BOCA RATON, FL 33434 US	7777 GLADES RD SUITE 110 BOCA RATON, FL 33434 US

2. Principal Place of Business	3. Mailing Address
7777 Glades Rd. Ste 400	7777 Glades Rd
Suite, Apt. #, etc. Boca Raton, FL	Suite, Apt. #, etc. Suite 400
City & State 33434 USA	City & State Boca Raton, FL
Zip / Country	Zip 33434 / Country USA

02222006 Chg-P CR2E034 (11/05)

4. FEI Number 65-0376849 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SHAPIRO, MICHAEL B
7777 GLADES RD
SUITE 110
BOCA RATON, FL 33434

7. Name and Address of New Registered Agent

Name: Michael B-Shapiro
Street Address (P.O. Box Number is Not Acceptable): 7777 Glades Rd Suite 400
City: Boca Raton FL Zip Code: 33434

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 _____ DATE 4/05/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	DPT SHAPIRO, MICHAEL B 7777 GLADES RD., STE 200 BOCA RATON, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	7777 Glades Rd- Ste 400	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DECTOR, ANDREW M 7777 GLADES ROAD, SUITE 110 BOCA RATON, FL 33434	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	7777 Glades Rd- Ste 400	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV BLASI, ANDREW 7777 GLADES RD STE 200 BOCA RATON, FL 33434	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	7777 Glades Rd- Ste 400	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVS WASSERMAN, JEFFREY P 7777 GLADES ROAD, SUITE 110 BOCA RATON, FL 33434	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	7777 Glades Rd- Ste 400	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LEVINE, DANIEL R 7777 GLADES ROAD, SUITE 110 BOCA RATON, FL 33434	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	7777 Glades Rd- Ste 400	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: _____ Michael B-Shapiro 4/5/06 561-477-7800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #