

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 479553

**FILED**  
**Mar 29, 2005**  
**Secretary of State**

**Entity Name:** BOTKIN PARSSI & ASSOCIATES, INC.

**Current Principal Place of Business:**

6141 LAKE WORTH ROAD  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

6141 LAKE WORTH ROAD  
LAKE WORTH, FL 33463 US

**Current Mailing Address:**

6141 LAKE WORTH ROAD  
LAKE WORTH, FL 33463

**New Mailing Address:**

6141 LAKE WORTH ROAD  
LAKE WORTH, FL 33463 US

**FEI Number:** 59-1690162

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PARSSI, BIJAN  
630 S. SAPODILLA AVENUE, #415  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

PARSSI, BIJAN  
1904 ASCOTT ROAD  
JUNO ISLES, FL 33408 US

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.

SIGNATURE: \_\_\_\_\_

03/29/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PARSSI, BIJAN  
Address: 630 S. SAPODILLA AVENUE, #415  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PARSSI, BIJAN  
Address: 1904 ASCOTT ROAD  
City-St-Zip: JUNO ISLES, FL 33408 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BIJAN PARSSI

P

03/29/2005

Electronic Signature of Signing Officer or Director

Date