


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # 481956
 1. Entry Name
JULIAN GOLDSTEIN & ASSOCIATES, INC.



Principal Place of Business 2730 SW 3RD AVENUE SUITE 203 MIAMI, FL 33129 US	Mailing Address 2730 SW 3RD AVENUE SUITE 203 MIAMI, FL 33129 US
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1620206	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 GOLDSTEIN, JULIAN
 611 OCEAN DR. APT 2E
 KEY BISCAYNE, FL 33149

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 _____ DATE _____
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, 2007 Fee will be \$350.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOLDSTEIN, JULIAN 611 OCEAN DR. APT 2E KEY BISCAYNE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDSTEIN, SANDRA 611 OCEAN DR. APT 2E KEY BISCAYNE, FL
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 04/06/07-80060-011 150.00

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: Julian Goldstein **JULIAN GOLDSTEIN** **CLU, ChFC** 3/28/07 305-858-8734
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #