## 2006 FOR PROFIT CORPORATION

## **FILED**

ANNUAL REPORT				Jan 17, 2006 08:00 AM			
DOCUMENT # 484083				S	ecretary	y of State	
1. Entity Name WEST OAKLAND PARK SERVICE CENTER, INC.							
Principal Place 5998 W. OAK SUNRISE, FL	KLAND PK BLVD.	Mailing Address 5998 W. OAKLAND PK BLVD. SUNRISE, FL 33313	7. 1.1. 1.1.2.7		EILE <b>memir maynık yıkımı</b> sılı	I Sans i Sans decit sant acult gerinunt 21 21	
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DO NOT WRITE IN THIS SPACE				01102006	No Chg-P	CR2E034 (11/05)	
DO NOT WRITE IN THIS SPACE				4. FEI Number 59-1845	074	Applied (   Not Appl	
			\ <u>\</u>	5. Certificate of	Status Desired	\$8.75 Additional Fee Required	
CTAREAG	6. Name and Address of Current F	tegistered Agent	-			in the species.	
STARFAS, FOTIOS 5015 JOHNSON STREET HOLLYWOOD, FL 33021					W TOP		
1.022	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		}	IN T	HIS SF	ACE	
8. The above	named entity submits this statement for	the purpose of changing its register	ed office or registe	ered agent, or both	in the State of Flo	orlda. I am familiar with, and a	
the obligat	ions of registered agent.	7 500	7		-12-0	<i>y</i> .	
SIGNATURE_	Signature, Woold or printed name of registered agent a	nd title if applicable. (NÖT: Register	Agent signatura require	od when reinstalling)	10-0	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	Election Campaign Fina     Trust Fund Contribution.		5.00 May Be ded to Fees			
10.	OFFICERS AND I	DIRECTORS	1	447 47		100	
NAME	STARFAS, FOTIOS	12. 12	Ì				
STREET ADORESS CITY-ST-ZIP	5015 JOHNSON STREET HOLLYWOOD, FL						
TITLE	SD						
NAME	STARFAS, GEORGE		1	, J	0.0003869	§5	
STREET ADORESS CITY-ST-ZIP	4420 W. BROWARD BLVD. PLANTATION, FL			Ül7l	.9706-8001	9-009 150.00	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP

<sup>12.</sup> I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information or supplemental report is true and accurate and trial my signature shall have the same legal effect as it made under oath; that I am an officer of the corporation or the receiver or tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or a changed, or on an attachment with an address with all other like empowered.