
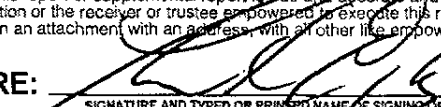


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # 509255		
1. Entity Name HOLTZMAN EQUELS, P.A.		
Principal Place of Business 2601 S. BAYSHORE DR. SUITE 600 MIAMI, FL 33133 US	Mailing Address 2601 S. BAYSHORE DR. SUITE 600 MIAMI, FL 33133 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HEF REGISTERED AGENT CORP. 2601 SOUTH BAYSHORE DRIVE SUITE 600 MIAMI, FL 33133		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EQUELS, THOMAS K. 2601 S. BAYSHORE DR. #600 MIAMI, FL 33133	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAIA, JOSEPH L 2601 BAYSHORE DR., STE. 600 COCONUT GROVE, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: 		Date: 2/6/2006 Daytime Phone #: 305-859-0200



01102006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1683022

Applied For
Not Applicable

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

1100000426336
02/20/06-80040-007 150.00