


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # 521223
1. Entity Name
ROBBINS, TUNKEY, ROSS, AMSEL, RABEN, WAXMAN & EIGLARSH, P.A.



Principal Place of Business Mailing Address
% 2250 SOUTHWEST THIRD AVENUE % 2250 SOUTHWEST THIRD AVENUE
MIAMI, FL 33129 MIAMI, FL 33129

DO NOT WRITE IN THIS SPACE



01102005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-1709242 Not Applicable

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

6. Name and Address of Current Registered Agent
TUNKEY, WILLIAM
2250 SW THIRD AVENUE
MIAMI, FL 33129-2045

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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	SD ROSS, ALAN 2250 S W THIRD AVE MIAMI, FL 00000,
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TD ROBBINS, FRED 2250 S W THIRD AVE MIAMI, FL 00000,
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PD TUNKEY, WILLIAM 2250 S W THIRD AVE MIAMI, FL 00000,
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VP AMSEL, ROBERT G 2250 SW 3RD AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VP RABEN, DAVID 2250 SW 3RD AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	

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UD0001190246
01/24/05-80126-019 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  1/26/05 (305) 858-9550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #