

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 556973

FILED  
Mar 14, 2011  
Secretary of State

Entity Name: ELLIOT KAPLAN, P.A.

**Current Principal Place of Business:**

20801 BISCAYNE BLVD.  
506  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

20801 BISCAYNE BLVD.  
506  
AVENTURA, FL 33180 US

**New Mailing Address:**

3020 NE 210 ST  
AVENTURA, FL 33180 US

FEI Number: 59-1795968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KAPLAN, ELLIOT  
20801 BISCAYNE BLVD  
STE 506  
AVENTURA, FL 33180 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KAPLAN, ELLIOT PRES  
Address: 3020 NE 208 ST  
City-St-Zip: AVENTURA, FL 33180 US

I hereby 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 all other like empowered.

SIGNATURE: ELLIOT KAPLAN

PRES

03/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date