

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 601041 1. Entity Name PODHURST ORSECK, P.A.					
Principal Place of Business 25 W. FLAGLER ST #800 MIAMI, FL 33130			Mailing Address 25 W. FLAGLER ST #800 MIAMI, FL 33130		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1263738	
5. Certificate of Status Desired ☐				Applied For ☐	
6. Name and Address of Current Registered Agent BECKHAM, WALTER H., JR 25 W FLAGLER ST #800 MIAMI, FL 33130				7. Name and Address of New Registered Agent Name Victor M. Diaz, Jr. Street Address (P.O. Box Number is Not Acceptable) 25 West Flagler Street, #800 City Miami	
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: <u><i>Victor M. Diaz, Jr.</i></u> (NOTE: Registered Agent signature required when reinstating) DATE: <u>9/21/04</u>					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PODHURST, AARON S 25 W FLAGLER ST #800 MIAMI, FL 33130	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER KATHERINE W. EZELL 25 W. Flagler St., #800, Miami, FL 33130	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV EATON, JOEL 25 W FLAGLER ST #800 MIAMI, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT 200041666492 10/07/04--01015--007 **\$1.25	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BECKHAM, WALTER H. JR. 25 W. FLAGLER ST. #800 MIAMI, FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY VICTOR M. DIAZ, JR. 25 W. Flagler St., #800, Miami, FL 33130	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV JOSEFBERG, ROBERT C 25 W FLAGLER STREET #800 MIAMI, FL 33130	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV MEADOW, BARRY L 25 W FLAGLER STREET #800 MIAMI, FL 33130	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV OLIN, MICHAEL S 25 W FLAGLER STREET #800 MIAMI, FL 33130	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT	☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Aaron Podhurst</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR AARON S. PODHURST			9/21/04 (305) 358-2800 Date Daytime Phone #		

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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