

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601380

FILED
Feb 10, 2009
Secretary of State

Entity Name: DRS. TOBIN, ZWIBEL & APTMAN, P.A.

Current Principal Place of Business:

8940 N. KENDALL DR
SUITE 802E
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

8940 N. KENDALL DR.
SUITE 802E
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 59-1273902 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELDSTONE, RONALD
201 ALHAMBRA CIRCLE
#601
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

PAUL, LESTER
9400 S. DADELAND BOULEVARD
#600
MIAMI, FL 33156 US

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: PAUL LESTER 02/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: APTMAN, MICHAEL
Address: 8940 N. KENDALL DR., #802E
City-St-Zip: MIAMI, FL 33176

Title: ST () Delete
Name: ZWIBEL, HOWARD L
Address: 8940 N. KENDALL DR., #802E
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL APTMAN PRES 02/10/2009

Electronic Signature of Signing Officer or Director Date