


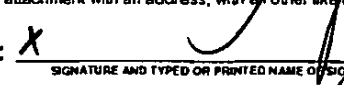
2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 19, 2005 8:00 am
Secretary of State

07-22-2005 90021 033 ***150.00
08-19-2005 90008 048 ***400.00

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1st MOORE CR2E034 (10/04)

DOCUMENT # 601529					
1. Entity Name LOUIS PESCE, P.A.					
Principal Place of Business 1311 WEST WEBSTER AVENUE WINTER PARK FL 32789			Mailing Address 1311 WEST WEBSTER AVENUE WINTER PARK FL 32789		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-1272396	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent PESCE, LOUIS 1311 W WEBSTER AVE WINTER PARK FL 32789			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City - FL Zip Code		
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 reappointing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing <input type="checkbox"/> \$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	PTD PESCE, LOUIS 1311 W. WEBSTER AVE. WINTER PARK FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PESCE, JANE W 1311 W. WEBSTER AVE. WINTER PARK FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
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: 			7-19-05 407-647-4180		
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR			Date City/Time Phone #		



ATTACHMENT
57062403

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 26, 2005

LOUIS PESCE, P.A.
1311 WEST WEBSTER AVENUE
WINTER PARK, FL 32789

Subject: LOUIS PESCE, P.A.

Reference Number: 601529

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS
ANNUAL REPORTS SECTION

pd 8-17-05