2005 FOR PROFIT CORPORATION

FILED Jan 24 2005 08:00 AM

	ANNUAL R	Secretary of State					
DOCU	MENT # 604591	na thaire manning or scatter outside on a set of scatter of the set of the se			· · · · · · · · · · · · · · · · · · ·	ary o	1 State
1. Entity Name	e						
HEIDEN	& HEIDEN, P.A.						
Principal Place	e of Business	Mailing Address	AN AND THE MARKET			-	
2019-A HOLLYWOOD BLVD 2019-A HOLLYWOOD BLVD HOLLYWOOD, FL 33020-4509 HOLLYWOOD, FL 33020-4509			l				
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			01072005	No Chg-P	CR2E03	34 (10/03)	
D	O NOT WRITE I	N THIS SPA	CE	4. FEI Numb			Applied For
				<u>59-148</u>			Not Applicable 88.75 Additional
				5. Certificate	of Status Desired		ee Required
	6. Name and Address of Current Reg	istered Agent					
FEINSTEIN	N, FRED			DO	NOT W	DITE	
	JTH LAKE DRIVE DOD, FL 33019	DO NOT WRITE					
HOLLTWC)OD, FL 33019		IN T	THIS SF	ACE		
	named entity submits this statement for the	purpose of changing its register	l ed office of register	rëd agënt, or bo	in, in the State of Flo	rida: I am fa	amiliar with, and accept
the obligat	ions of registered agent.						
SIGNATURE_	Signature, typed or printed name of registered agent and life	le il applicable	d Agent signatura required	รี เค้าตก refnstalling	Action to the same of the same	· 2: AND DATE	
	197 . 14 No. 15	*** - * * * * * * * * * * * * * * * * *		William Street			
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.	6.00 May Be UN0000190413 ded to Fees 01/24/05-80132-012 150.00				
10.	OFFICERS AND DIR	ECTORS				4	
TITLE NAME	PST HEIDEN, STEPHEN	,					
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NAME							
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TITLE						·· · · · · · ·	
STREET ADDRESS							

12. It hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Provide rentifier 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: _