

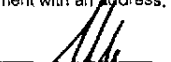


FILED
Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # 635121 1. Entity Name MICHAEL HALPERN, P.A.				Secretary of State		
Principal Place of Business 209 DUVAL STREET KEY WEST, FL 33040		Mailing Address 209 DUVAL STREET KEY WEST, FL 33040				
DO NOT WRITE IN THIS SPACE						
				01252005 No Chg-P CR2E034 (10/03)		
				4. FEI Number 59-1943167		
				Applied For Not Applicable		
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent HALPERN, MICHAEL 209 DUVAL STREET KEY WEST, FL				DO NOT WRITE IN THIS SPACE		
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 re-stating) _____ DATE _____						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HALPERN, MICHAEL 209 DUVAL STREET KEY WEST, FL					
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
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TITLE NAME STREET ADDRESS CITY - ST - ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  as President		2/22/05 (305) 296-5667				
MICHAEL HALPERN		Date Daytime Phone #				