2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 664261

Entity Name: ROBBINS AND REYNOLDS, P.A.

9200 S DADELAND BLVD #614

MIAMI, FL 33156 US

Address: City-St-Zip: FILED Feb 01, 2008 Secretary of State

Littly Nan	IE. ROBBING AND RETNOLDS, F.A.	
Current Pr	incipal Place of Business:	New Principal Place of Business:
9200 S. DA #614	DELAND BLVD	9200 S. DADELAND BLVD #412
MIAMI, FL	33156 US	MIAMI, FL 33156 US
Current Mailing Address:		New Mailing Address:
9200 S. DA #614	DELAND BLVD	9200 S. DADELAND BLVD #412
MIAMI, FL	33156 US	MIAMI, FL 33156 US
FEI Number:	59-1973944 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:
ROBBINS, ROBERT A ESQ 9200 S. DADELAND BLVD SUITE 614 MIAMI, FL 33156 US		ROBBINS, ROBERT A ESQ 9200 S. DADELAND BLVD SUITE 412 MIAMI, FL 33156 US
The above in the State		purpose of changing its registered office or registered agent, or both,
SIGNATURE: ROBERT A. ROBBINS		02/01/2008
	Electronic Signature of Registered A	gent Date
Election Carr	npaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P () Delete ROBBINS, ROBERT A 9200 S DADELAND BLVD #614 MIAMI, FL 33156 US	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VP () Delete REYNOLDS, MARC J 9200 S DADELAND BLVD #614 MIAMI, FL 33156 US	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name:	S () Delete ROBBINS, JULIETTE A	Title: () Change () Addition Name:

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT A. ROBBINS PRES 02/01/2008