

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 676104

FILED  
Apr 09, 2010  
Secretary of State

**Entity Name:** ZELDON SHEINFELD AND ASSOCIATES, INC.

**Current Principal Place of Business:**

9137A SW 20TH PLACE  
DAVIE, FL 33324 US

**New Principal Place of Business:**

445 NE195 STREET  
122  
MIAMI, FL 33179 US

**Current Mailing Address:**

9137A SW 20TH PLACE  
DAVIE, FL 33324 US

**New Mailing Address:**

4601 SHERIDAN STREET  
C/O SHELDON DAGEN, PA STE.210  
HOLLYWOOD, FL 33021 US

**FEI Number:** 59-2004380

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHEINFELD, ZELDON  
9137A SW 20TH PLACE  
DAVIE, FL 33324 US

**Name and Address of New Registered Agent:**

SHEINFELD, ZELDON PRES  
445 NE 195 STREET  
122  
MIAMI, FL 33179 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: ZELDON SHEINFELD

04/09/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: SHEINFELD, ZELDON  
Address: 445 NE 195 STREET APT. 122  
City-St-Zip: MIAMI, FL 33179

Title: DVT  
Name: SHEINFELD, LINDA L  
Address: 445 NE 195 STREET APT. 122  
City-St-Zip: MIAMI, FL 33179

I hereby 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 all other like empowered.

SIGNATURE: ZELDON SHEINFELD

PRES

04/09/2010

Electronic Signature of Signing Officer or Director

Date