## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # 676212** 1. Entity Name IRA GOLDBERG & SON, INC. Principal Place of Business Mailing Address 3 ALEXANDER COURT 3 ALEXANDER COURT ORMOND BCH, FL 32174 ORMOND BCH, FL 32174 No Chg-P CR2E034 (10/03) 01282005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-2005307 \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent GOLDBERG, IRA DO NOT WRITE 3 ALEXANDER COURT ORMOND BCH, FL 32174 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 obligation SIGNATURE (NOTE. Registered Agent signature required when reinstating) \$5.00 May Be 9, Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE GOLDBERG, IRA NAME STREET ADDRESS 3 ALEXANDER CT CITY -ST - ZIP ORMOND BEACH, FL TITLE GOLDBERG, MICHAEL A NAME 1538 POPLAR DR. STREET ADDRESS CITY-SI-ZIP ORMOND, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 it 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.

**FILED** 

Feb 02, 2005 08:00 AM