2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2006
Secretary of State

DOCUMENT# 684545

Entity Name: DAVID EIGLARSH, PA

Current Principal Place of Business:

C/O D EIGLARSH
2500 WESTON ROAD #103
WESTON, FL 33331 US

New Principal Place of Business:

C/O D EIGLARSH
2625 WESTON ROAD
WESTON, FL 33331 US

Current Mailing Address:

1301 SHOTGUN ROAD
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 59-2018218 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EIGLARSH, LAWRENCE
2579 MAYFAIR LANE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: EIGLARSH, DOROTHY,
Address: 2500 WESTON ROAD SUITE 103
City-St-Zip: WESTON, FL 33331

Title: SD ( ) Delete
Name: EIGLARSH, LAWRENCE
Address: 2500 WESTON ROAD SUITE 103
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: EIGLARSH, DOROTHY,
Address: 2625 WESTON ROAD
City-St-Zip: WESTON, FL 33331

Title: SD (X) Change ( ) Addition
Name: EIGLARSH, LAWRENCE
Address: 2625 WESTON ROAD
City-St-Zip: WESTON, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: DOROTHY EIGLARSH PD 07/06/2006

Electronic Signature of Signing Officer or Director Date