

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 08:00 AM
Secretary of State

DOCUMENT # 687866	
1. Entity Name SANDLER, TRAVIS & ROSENBERG, P.A.	

Principal Place of Business 5200 BLUE LAGOON DRIVE, SUITE 600 MIAMI, FL 33126-9022	Mailing Address 5200 BLUE LAGOON DRIVE, SUITE 600 MIAMI, FL 33126-9022
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DO NOT WRITE IN THIS SPACE



01182005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2027519	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**TRAVIS, THOMAS G
5200 BOUE LAGOON DR., #600
MIAMI, FL 33126**

**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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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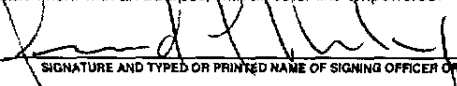
10. OFFICERS AND DIRECTORS

TITLE SVM	NAME TRAVIS, THOMAS G
STREET ADDRESS 5200 BLUE LAGOON DR	CITY-ST-ZIP MIAMI FL 33126
TITLE TDP	NAME SANDLER, GILBERT L
STREET ADDRESS 5200 BLUE LAGOON DR	CITY-ST-ZIP MIAMI, FL 33126
TITLE D	NAME ROSENBERG, LEONARD L.
STREET ADDRESS 5200 BLUE LAGOON DR	CITY-ST-ZIP MIAMI, FL 33126
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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01/28/05-80023-003 150.00

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 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:  **1/21/05 (305) 267-9200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Leonard L. Rosenberg