## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F0400004631

1. Entity Name

STEPHEN A. BECKER, P.C.



FILED Mar 19, 2008 08:00 A Secretary of State

Principal Place of Business

SIGNATURE:

Mailing Address

600 13TH STREET, N.W. 12TH FLOOR WASHINGTON, DC 20005-3096

600 13TH STREET, N.W. 12TH FLOOR WASHINGTON, DC 20005-3096



02292008

3/5/08

Date

202 156 8608

Daytime Phone #

No Chg-P

CR2E034 (11/05)

4. FEI Number 36-4290708 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

COLEMAN, IRA J 201 S. BISCAYNE BLVD., 22ND FLOOR MIAMI, FL 33131-4336

## DO NOT WRITE IN THIS SPACE

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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 Signature typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating)  OATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees			
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PCST BECKER, STEPHEN A 600 13TH STREET, N.W., 12TH FLOO WASHINGTON, DC 200053096	)R			
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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					

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR