2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 15, 2007 8:00 am Secretary of State

OCUMENT#F1/2/4		
Entity Name		I MAKE TO
IARTIN AND RUBIN, P.A.		
	-	1965
		1 72 77 78 78 78

NAME SIRET ADDRESS CITY-ST-ZIP BELFANY BEACH, FL 15945 ITILE AS MARTIN, SHEILA M SIRET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 ITILE NAME SIRET ADDRESS CITY-ST-ZIP ITILE SIRET ADDRESS CITY-ST-ZIP SIRET ADDRESS CITY-ST-ZIP SIRET ADDRESS CITY-ST-ZIP SIRET ADDRESS CITY-ST-ZIP SIRET ADDRESS	1. Entity Nam	e	#1 17274 BIN, P.A.	-				02-15-2007	90046 01	12 ***150).00
2. Principal Place of Business - No P.O. Box # 3. Mailing Address	7280 W. PAL SUITE 304	METTO PAR	RK RD.	7280 W. PALMETTO PA SUITE 304			đunr	∪ ∪~ -			
Sulic, Apl. #, etc.											
City & State	Suite, Apt.	#, etc.	- 19-91-9-1	Suite, Apt. #, etc.						,	(BA) (1 (BA)
Signature Country Zip Country S. Cerrificate of Status Desired \$8.75 Additional Pere Required Registered Agent 7. Name and Address of New Register	City & State	e		City & State			4. FEI Numb	er		Ар	
MARTIN, RONALD T 7280 W. PALMETTO PARK ROAD SUITE 304 BOCA RATON, FL 33433 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Fiorida. I am tambier with, and accept the obligations of registered agent. SIGNATURE FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 After May 1, 2007 Fee will be \$55	Zip		Country	Zip	Countr	<u>-</u>	i			\$8.75 Add	itional
Name Name Name Street Address (P O. Box Number is Not Acceptable)		6. Name	and Address of Current	Registered Agent	<u> </u>		7. Name and	Address of New R			
SUITE 304 BOCA RATON, FL 33433 8. The above named critity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Fiorida, I am familiar with, and accept the obligations of registered agent. SIGNATURE Symbox. Lend or private submit is fabilitation (NOT: Regulate Agent signature recitate when twinstands) DATE				<u> </u>		Name		<u> </u>	-9	3	
BOCA RATON, FL 33433 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature True	7280 W. P.	ALMETTO			-	Street Address (P O. Box Number is Not Acceptable)					
## Till Now III FEE IS \$150.00 ## After May 1, 2007 Fee will be \$550.00 ## Comment of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. ### FILE NOWIII FEE IS \$150.00 ### After May 1, 2007 Fee will be \$550.00 ### OFFICERS AND DIRECTORS ### 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ### 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ### 12. ADDITIONS/CHANGES TO			33433								
THE HOUSE STREET ADDRESS FILE NOWITH FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITIEL NAME RUBIN, ROBERT L 1994 OFFICERS AND DIRECTORS IN 11 TO STREET ADDRESS STREET ADDRESS OTTY-ST-2P BELEAWY SEARCH, FLF-1994 OFFICERS AND DIRECTORS OTTY-ST-2P THE AS OFFICERS AND DIRECTORS OTTY-ST-2P BELEAWY SEARCH, FLF-1994 OFFICERS AND DIRECTORS OTTY-ST-2P THE AS OFFICERS AND DIRECTORS OTTY-ST-2P BELEAWY SEARCH, FLF-1994 OFFICERS AND DIRECTORS OTTY-ST-2P THE AS OTTY-ST-2P BOCA RATON, FL 33433 CITY-ST-2P BOCA RATON, FL 33433 CITY-ST-2P THE ANDERS OFFICERS AND DIRECTORS OTTY-ST-2P THE AS OTTY-ST-2P THE AS OTTY-ST-2P THE AS OTTY-ST-2P THE AS OTTY-ST-2P THE AND OFFICERS AND DIRECTORS OTTY-ST-2P THE AS OTTY-S						City.			FL	Zip Code	•
Symature, fund of printed super larget and elegatived agent and steel a specialist. (NOTE Registered Agent significant reculsion where iterations)	8. The above the obligat	named entity lons of regist	y submits this statement fo tered agent.	or the purpose of changing its	registere	d office or reg	gistered agent, or bo	th, in the State of Flo	rida. Lam f	amiliar with,	and accept
After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Addided to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE PROME RUBIN, ROBERT L 195 SPRING: 140R60R-BIT APPT BULLANN SEASCH, FLE-35945 CITY-ST-2IP BULLANN SEASCH, FLE-35945 CITY-ST-2IP BOCA RATON, FL 33433 CITY-ST-2IP ITILE MARTIN, RONALD T SIREET ADDRESS CITY-ST-2IP BOCA RATON, FL 33433 CITY-ST-2IP BOCA RATON, FL 33433 CITY-ST-2IP ITILE MARTIN, RONALD T SIREET ADDRESS CITY-ST-2IP BOCA RATON, FL 33433 CITY-ST-2IP TITLE MARTIN, RONALD T SIREET ADDRESS CITY-ST-2IP BOCA RATON, FL 33433 CITY-ST-2IP TITLE MARTIN, RONALD T SIREET ADDRESS CITY-ST-2IP BOCA RATON, FL 33433 CITY-ST-2IP TITLE MARTIN, RONALD T SIREET ADDRESS CITY-ST-2IP TITLE MARTIN, RONALD T SIREET ADDRESS CITY-ST-2IP TITLE MARTIN, RONALD T SIREET ADDRESS CITY-ST-2IP TITLE MARE SIREET ADDRESS CITY-ST-2IP MARE SIREET ADDRESS CITY-ST-2IP TITLE MARE SIREET ADDRESS CITY-S	SIGNATURE_	Signature, typed	or printed name of registered agent	and title if applicable. (NOT	E: Registered	Agent signature re	equired when reinstating)		DATE		
TITLE VP Delete NAME RUBIN, ROBERT L 1695 9/PRING 14AR89R-9F-APT DELETA PORESS STREET ADDRESS STREET ADDRESS CITY-ST-2IP DELETA PORESS DELETA PORE											
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city-st-zip City-st-zip 12. I hereby 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	NAME STREET ADDRESS CITY-ST-ZIP				NAME STREE CITY-:	t address St-zip					Addition

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.

SIC	3N/	ΔΤΙΙ	RF

Manustum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/07

561/338-4100 Daytime Phone •