

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F23671

FILED
Jan 29, 2008
Secretary of State

Entity Name: IVAN M. TOBIAS, P.A.

Current Principal Place of Business:

9130 S DADELAND BLVD
1528
MIAMI, FL 33156 US

Current Mailing Address:

9130 S DADELAND BLVD
1528
MIAMI, FL 33156 US

New Principal Place of Business:

4000 PONCE DE LEON BLVD
470
CORAL GABLES, FL 33146 US

New Mailing Address:

4000 PONCE DE LEON BLVD
470
CORAL GABLES, FL 33146 US

FEI Number: 59-2073278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOBIAS, IVAN M
9130 S DADELAND BLVD
STE 1528
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

TOBIAS, IVAN M
4000 PONCE DE LEON BLVD
STE 470
CORAL GABLES, FL 33146 US

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:

01/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TOBIAS, IVAN M,
Address: 9130 S DADELAND BLVD STE 1528
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: TOBIAS, IVAN M,
Address: 4000 PONCE DE LEON BLVD. STE 470
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify 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: IVAN M. TOBIAS

PRES

01/29/2008

Electronic Signature of Signing Officer or Director

Date