2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F60160

1. Entity Name JAY SERBIN, C.P.A., P.A.



FILED
Jan 28, 2008 08:00 All
Secretary of State

Principal Place of Business

9600 W SAMPLE ROAD

STE 501

Mailing Address

PO BOX 8847

CORAL SPRINGS, FL 33075

CORAL SPRINGS, FL 33065							
			01262008 No Chg-P CR2E034 (11/05)				
DO NOT WRITE IN THIS SPA			, ⊏	4. FEI Numbe 59-2146			Applied For Not Applicable
*	A Commence of the Commence of				of Status Desired		5 Additional equired
	6. Name and Address of Current Regis	tered Agent	2 3 3 3		17日本日本代		
SERBIN, JAY 9600 W SAMPLE ROAD STE 501 CORAL SPRINGS, FL 33065			DO NOT WRITE IN THIS SPACE				
			a para di series	198		1,197,36	
	named entity submits this statement for the plants of registered agent.			_	n, in the State of Flo		r with, and accept
·	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	Agent signature require	d when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	 Election Campaign Finan Trust Fund Contribution. 		.00 May Be led to Fees			
10. OFFICERS AND DIRECTORS			1.		1		
NAME STREET ADDRESS CITY-ST-ZIP	DP SERBIN, JAY 9600 W SAMPLE ROAD STE 501 CORAL SPRINGS, FL 33065						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000 02/05/08-	803118 80011-014	150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			s Nassa sharar				
TITLE NAME STREET ADORESS							

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/08

954-346-1996

Daytime Phone #