2006 FOR PROFIT CORPORATION FILED **ANNUAL REPORT** Apr 17, 2006 08:00 AN Secretary of State DOCUMENT # F96747 1. Entity Name CRAIG G. RICHMAN, P.A. Mailing Address Principal Place of Business 2505 NW BOCA RATON BLVD 2505 NW BOCA RATON BLVD SUITE 202 SUITE 202 BOCA RATON, FL 33431 BOCA RATON, FL 33431 US No Chg-P CR2E034 (11/05) 02022006 DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2215934 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent POMERANCE, ROGER M P.A. DO NOT WRITE 1900 NW CORPORATE BLVD STE 201E EAST BLDG IN THIS SPACE BOCA RATON, FL 33431 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees

NAME, RICHMAN, CRAIG GARY 10914 NW 71ST COURT STREET ADDRESS CITY-ST-ZIP PARKLAND, FL 33076 DUE NAME

OFFICERS AND DIRECTORS

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DO NOT WRITE IN THIS SPACE

Daytime Phone

Applied For

Not Applicable

1	12. I horoby 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.

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SIGNATURE:	Cray b. Rich	- Craig G. Richman	14-12-06	. 1 561 368 6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR