


2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 14, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # G00227</b>	
1. Entity Name DAVID L. SWIMMER, P. A.	

Principal Place of Business 7990 SW 117TH AVENUE 100 MIAMI, FL 33183	Mailing Address 7990 SW 117TH AVENUE 100 MIAMI, FL 33183
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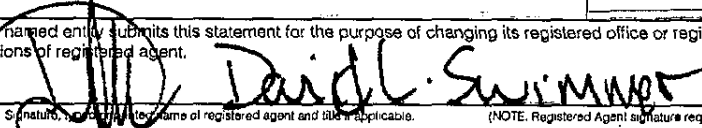


01182005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2218051	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  SWIMMER, DAVID L 7990 SW 117TH AVENUE STE 100 MIAMI, FL 33183	<b>DO NOT WRITE IN THIS SPACE</b>
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 	DATE 1/18/05
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SWIMMER, DAVID L 7990 SW 117TH AVE STE 100 MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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UNIQUEID: 304504  
04/14/05-80046-005 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 	DATE 1/18/05	305-274-1222
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