

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H23377

FILED
Feb 24, 2005
Secretary of State

Entity Name: KNIPES COHEN OF FLORIDA, INC.

Current Principal Place of Business:

C/O BERNARD M. GOLDSTEIN
1400 CENTREPARK BLVD, SUITE 960
W PALM BEACH, FL 33401

Current Mailing Address:

C/O BERNARD M. GOLDSTEIN
1400 CENTREPARK BLVD, SUITE 960
W PALM BEACH, FL 33401

New Principal Place of Business:

C/O BERNARD M. GOLDSTEIN
1601 BELVEDERE ROAD, SUITE 204-E
W PALM BEACH, FL 33406

New Mailing Address:

C/O BERNARD M. GOLDSTEIN
1601 BELVEDERE ROAD, SUITE 204-E
W PALM BEACH, FL 33406

FEI Number: 59-2457022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSTEIN, BERNARD M.
1400 CENTREPARK BOULEVARD, SUITE 960
W PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

GOLDSTEIN, BERNARD M.
1601 BELVEDERE ROAD
SUITE 204-E
W PALM BEACH, FL 33406 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:

02/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GOLDSTEIN, BERNARD M.
Address: 1400 CENTREPARK BLD #960
City-St-Zip: W PALM BEACH, FL 33401 US

Title: DST () Delete
Name: COHEN, ROBERT,
Address: 1400 CENTREPARK BLD #960
City-St-Zip: W PALM BEACH, FL 33401 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GOLDSTEIN, BERNARD M.
Address: 1601 BELVEDERE ROAD, SUITE 206
City-St-Zip: W PALM BEACH, FL 33406 US

Title: DST (X) Change () Addition
Name: COHEN, ROBERT,
Address: 1601 BELVEDERE ROAD, SUITE 204-R
City-St-Zip: W PALM BEACH, FL 33406 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BERNARD M. GOLDSTEIN

PRES

02/24/2005

Electronic Signature of Signing Officer or Director

Date