

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # H80525	
1. Entity Name MOSKOWITZ, MANDELL, SALIM & SIMOWITZ, P.A.	

Principal Place of Business 800 CORPORATE DR SUITE 510 FT. LAUDERDALE FL 33334 US	Mailing Address 800 CORPORATE DR SUITE 510 FT. LAUDERDALE FL 33334 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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1st MOORE CR2E034 (10/04)

4. FEI Number 59-2588564	☐ Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MOSKOWITZ, MICHAEL W. 800 CORPORATE DRIVE SUITE 510 FT. LAUDERDALE FL 33334	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP MOSKOWITZ, MICHAEL W. 800 CORPORATE DR, STE 510 FT. LAUDERDALE FL 33334 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVS MANDELL, CRAIG J 800 CORPORATE DR, STE 510 FT. LAUDERDALE FL 33334 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVT SALIM, WILLIAM G JR 800 CORPORATE DR, STE 510 FT. LAUDERDALE FL ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV SIMOWITZ, SCOTT E 800 CORPORATE DR. STE. 510 FT LAUDERDALE FL 33334 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition U000000217272 02/07/05-80017-018 150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: 	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date 2/3/05	Overtime Phone # (954) 491-2000
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