ANNUAL REPORT

DOCUMENT # J08506

1. Entity Name

LAW OFFICES OF RICHARD S. AGSTER, P.A.



FILED Jan 17, 2006 8:00 am Secretary of State

01-17-2006 90237 003 ***150.00

Principal Place of Susiness

Mailing Address

3602 WEST EUCLID AVE. TAMPA, FL 33629 3602 WEST EUCLID AVE. TAMPA, FL 33629



DO NOT WRITE IN THIS SPACE

01062006 N

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2653802

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AGSTER, RICHARD S. 3602 WEST EUCLID AVE. TAMPA, FL 33629

DO NOT WRITE IN THIS SPACE

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: Registered Agent signature required when releasing) DATE									
After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 M Added to F					
10.	OFFICERS AND DIREC	TORS	İ			20	. 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AGSTER, RICHARD S. HTAM: BAWS BLVB. 4114 W TAMPA, FL 33609	. MCKAY AVL.		; ₩			erii V	•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						*	₩ A), #		
TITLE	,			- 4		-			

DO NOT WRITE IN THIS SPACE

12. I hereby 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.

SIGNATURE:

NAME STREET ADDRESS

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

1/10/06

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