

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90449 037 ***150.00

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1. Entity Name

DRS. SILVERSTEIN & SILVERSTEIN, D.O., P.A.



Principal Place of Business

50 N.E. 26TH AVENUE - SUITE 402
POMPAÑO BEACH, FL 32962 33062

Mailing Address

50 N.E. 26TH AVENUE - SUITE 402
POMPAÑO BEACH, FL 32962 33062

DO NOT WRITE IN THIS SPACE



04192005 No Chg-P CR2E034 (10/03)

4. FEI Number

59-2726432

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEC CONSULTANTS, INC.
1515 INDIAN RIVER BLVD
SUITE A 210
VERO BEACH, FL 32960-7103

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
SILVERSTEIN, STEPHEN D.O.
50 NE 26TH AVE. #402
POMPAÑO BEACH, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
SILVERSTEIN, SCOTT D.O.
50 NE 26TH AVE., #402
POMPAÑO BEACH, FL 33062

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

**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:

Stephen Silverstein **STEPHEN SILVERSTEIN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/05

954-943-5044