

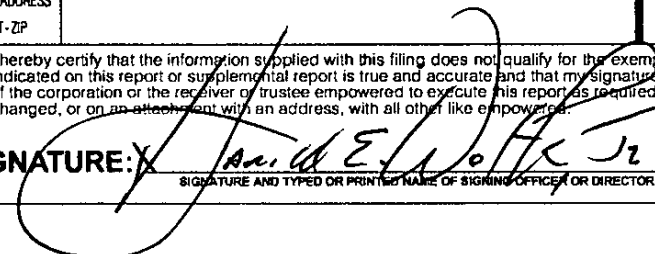


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

01-17-2006 90243 025 ***150.00

DOCUMENT # J39917 1. Entity Name HAROLD E. WOLFE, JR., P.A.			
Principal Place of Business 2300 PALM BEACH LAKES STE 302 WEST PALM BEACH, FL 33409		Mailing Address 2300 PALM BEACH LAKES STE 302 WEST PALM BEACH, FL 33409	
			
		01062006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2737567 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			
WOLFE HAROLD E JR ESQ 2300 PALM BEACH LAKES BLVD. STE 302 WEST PALM BEACH, FL 33409			
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP WOLFE HAROLD E JR ESQ 2300 PALM BEACH LAKES BLVD., STE 302 W. PALM BCH., FL		
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12. I hereby certify that the information supplied with this filing 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: 		Date: Jan. 17, 2006 Daytime Phone #: 561-697-4100	