

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

1/5  
FILED  
Jan 24, 2005 08:00 AM  
Secretary of State  
ENTERED JAN 24 2005

PAID  
JAN 20 2005  
BY: 64286



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-1060902 Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

SMALL, HARRIS A JR  
4300 N. OCEAN BLVD. 16-K  
FORT LAUDERDALE, FL 33308

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 PTD  
NAME SMALL, HARRIS A JR  
STREET ADDRESS 4300 N OCEAN BLVD. 16-K  
CITY-ST-ZIP FORT LAUDERDALE, FL 33308

TITLE VD  
NAME SMALL, JONATHAN  
STREET ADDRESS 3021 NE 55 PLACE  
CITY-ST-ZIP FORT LAUDERDALE, FL 33308

TITLE VSD  
NAME WITTNEBEN, DEBORAH  
STREET ADDRESS 1660 NE 38TH ST.  
CITY-ST-ZIP OAKLAND PARK, FL 33334

TITLE V  
NAME FERGUSON, SUSAN  
STREET ADDRESS 6601 N. ANDREWS AVE.  
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE V  
NAME SMALL, HARRIS A III  
STREET ADDRESS 6601 N. ANDREWS AVE.  
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000193975  
01/25/05-80083-001 150.00

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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, without other like empowered

SIGNATURE:

*Deborah Wittneben* 1-20-05 954 772 8880  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #