

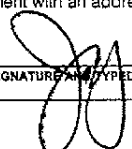


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # K79914 1. Entity Name JEFF TOMBERG, J.D., P.A.			
Principal Place of Business 626 SE 4TH STREET BOYNTON BEACH, FL 33435		Mailing Address P.O. BOX 1426 BOYNTON BCH, FL 33425	
DO NOT WRITE IN THIS SPACE			
		 01062006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0103087	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TOMBERG, JEFF 626 S.E. 4TH ST. BOYNTON BEACH, FL 33435		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing) DATE</small>			
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	1000000409457 02/08/06-80101-002 150.00
10. OFFICERS AND DIRECTORS			
TITLE	PVP		
NAME	TOMBERG, JEFF		
STREET ADDRESS	626 SE 4TH STREET		
CITY- ST- ZIP	BOYNTON BEACH, FL 33435		
TITLE	STD		
NAME	TOMBERG, JEFF		
STREET ADDRESS	626 SE 4TH STREET		
CITY- ST- ZIP	BOYNTON BEACH, FL 33435		
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
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: 		JEFF TOMBERG 1/22/06	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>