


2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 10, 2005 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # K90265 1. Entity Name ADELE PAUL O.D., P.A. |  |
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| Principal Place of Business 2434 SW 28 LANE MIAMI, FL 33133 US | Mailing Address 2434 SW 28 LANE MIAMI, FL 33133 US |
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DO NOT WRITE IN THIS SPACE



01052005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0126036 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent PAUL, ADELE 2380 SW 28TH STREET MIAMI, FL 33133 | DO NOT WRITE IN THIS SPACE |
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| 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 <u>Adele Paul</u> <small>Signature, typed or printed name of registered agent and filer if applicable.</small> | <u>ADELE PAUL</u> <small>(NOTE: Registered Agent signature required when reinstating)</small> | <u>1/5/05</u> <small>DATE</small> |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PST PAUL, ADELE 2380 SW 28 ST MIAMI, FL 33133 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DAVID R. FITZGERALD 2380 SW 28 ST MIAMI, FL 33133 |
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| 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: <u>Adele Paul</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <u>ADELE PAUL</u> | <u>1/5/05</u> <u>305 856 6578</u> <small>Date Daytime Phone #</small> |