

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L61749

**FILED**  
**Jan 03, 2007**  
**Secretary of State**

**Entity Name:** MICHAEL SCHIFFRIN & ASSOCIATES, P.A.

**Current Principal Place of Business:**

9130 SOUTH DADELAND BLVD  
SUITE 1109, 2 DATRAN CENTER  
MIAMI, FL 33156 US

**New Principal Place of Business:**

**Current Mailing Address:**

9130 SOUTH DADELAND BLVD  
SUITE 1109, 2 DATRAN CENTER  
MIAMI, FL 33156 US

**New Mailing Address:**

**FEI Number:** 65-0182320      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHIFFRIN, MICHAEL ESQ  
9130 SOUTH DADELAND BLVD  
2 DATRAN CENTER, SUITE 1109  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

SCHIFFRIN, MICHAEL  
9130 SOUTH DADELAND BLVD  
2 DATRAN CENTER, SUITE 1109  
MIAMI, FL 33156 US

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.

SIGNATURE: S/ MICHAEL SCHIFFRIN      01/03/2007  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SCHIFFRIN, MICHAEL,  
Address: 9130 SOUTH DADELAND BLVD, SUITE 1109  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SCHIFFRIN, MICHAEL  
Address: 9130 SOUTH DADELAND BLVD, SUITE 1109  
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S/ MICHAEL SCHIFFRIN      PRES      01/03/2007  
Electronic Signature of Signing Officer or Director      Date