

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # M03832

1. Entity Name
PETER GRABLE, P.A.



Principal Place of Business
804 N. OLIVE AVE., 1ST FLOOR
WEST PALM BEACH, FL 33401

Mailing Address
804 N. OLIVE AVE., 1ST FLOOR
WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE

FILED
Mar 12, 2007 08:00 AM
Secretary of State



02092007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2441897 ☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GRABLE, ESQ., PETER
804 N OLIVE AVE
1ST FLOOR
WEST PALM BEACH, FL 33401

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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 _____

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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GRABLE, PETER 317 SALINAS DR PALM BEACH GARDENS, FL 33410
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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03/21/07-80041-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 12 / 2007

Date

Daytime Phone #