

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 07, 2005 8:00 am**  
**Secretary of State**

01-07-2005 90013 046 \*\*\*150.00

<b>DOCUMENT # M21484</b> 1. Entity Name <b>SPENCER AND KLEIN, PROFESSIONAL ASSOCIATION</b>					
Principal Place of Business <b>TWO ALABAMA PLAZA PENTHOUSE II B CORAL GABLES, FL 33134</b>				Mailing Address <b>TWO ALABAMA PLAZA PENTHOUSE II B CORAL GABLES, FL 33134</b>	
2. Principal Place of Business <b>Two Alhambra Plaza</b> Suite, Apt. #, etc. <b>Penthouse IIB</b> City & State <b>Coral Gables, FL</b> Zip <b>33134</b>		3. Mailing Address <b>Two Alhambra Plaza</b> Suite, Apt. #, etc. <b>Penthouse IIB</b> City & State <b>Coral Gables, FL</b> Zip <b>33134</b>		4. FEI Number <b>59-2626836</b>	
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>KLEIN, BRENT D. TWO ALABAMA PLAZA PENTHOUSE II B CORAL GABLES, FL 33134</b>				7. Name and Address of New Registered Agent Name <b>Brent D. Klein</b> Street Address (P.O. Box Number is Not Acceptable) <b>Two Alhambra Plaza</b> <b>Penthouse IIB</b> City <b>Coral Gables</b> <b>FL</b> Zip Code <b>33134</b>	
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  DATE <b>1/4/05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PD NAME SPENCER, THOMAS R., JR. STREET ADDRESS TWO ALABAMA PLAZA, PENTHOUSE II B CITY-ST-ZIP CORAL GABLES, FL 33134	<input type="checkbox"/> Delete		TITLE PD NAME Thomas R. Spencer STREET ADDRESS Two Alhambra Plaza, Penthouse IIB CITY-ST-ZIP Coral Gables, FL 33134	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DST NAME KLEIN, BRENT D. STREET ADDRESS TWO ALABAMA PLAZA, PENTHOUSE II B CITY-ST-ZIP CORAL GABLES, FL 33134	<input type="checkbox"/> Delete		TITLE DST NAME Brent D. Klein STREET ADDRESS Two Alhambra Plaza, Penthouse IIB CITY-ST-ZIP Coral Gables, FL 33134	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:			<b>Brent D. Klein, Secretary</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>1/4/05</b> Daytime Phone # <b>305-446-5711</b>		