




**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 16, 2005 8:00 am
Secretary of State

05-16-2005 90198 039 ***150.00

DOCUMENT # M21826 1. Entity Name SANCHEZ & LEVITAN, INC.																																																																																																																																			
Principal Place of Business 1790 CORAL WAY 3RD FLOOR MIAMI, FL 33145 US			Mailing Address 1790 CORAL WAY 3RD FLOOR MIAMI, FL 33145 US																																																																																																																																
2. Principal Place of Business 1790 CORAL WAY Suite, Apt. #, etc. #200		3. Mailing Address 1790 CORAL WAY Suite, Apt. #, etc. #200																																																																																																																																	
City & State MIAMI FL		City & State MIAMI FL		4. FEI Number 59-2586599																																																																																																																															
Zip 33145		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																															
6. Name and Address of Current Registered Agent LEVITAN, AIDA 1790 CORAL WAY THIRD FLOOR MIAMI, FL 33145				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1790 CORAL WAY #200 City MIAMI																																																																																																																															
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 reinstating) DATE</small>																																																																																																																																			
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																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. 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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:  FAUSTO SANCHEZ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date Daytime Phone #																																																																																																																																			