

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M44224

FILED  
Mar 14, 2005  
Secretary of State

Entity Name: LAWRENCE F. MICHELSON, P.A.

## Current Principal Place of Business:

1550 MADRUGA AVE.  
#120  
CORAL GABLES, FL 33156 US

## Current Mailing Address:

10301 SW 69TH AVE  
MIAMI, FL 33156 US

## New Principal Place of Business:

1550 MADRUGA AVE.  
#120  
CORAL GABLES, FL 33146 US

## New Mailing Address:

1550 MADRUGA AVE  
#120  
CORAL GABLES, FL 33146 US

FEI Number: 59-2753005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MICHELSON, LAWRENCE F  
1550 MADRUGA AVE #120  
CORAL GABLES, FL 33156 US

## Name and Address of New Registered Agent:

MICHELSON, LAWRENCE F  
1550 MADRUGA AVE  
#120  
CORAL GABLES, FL 33146 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:

03/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MICHELSON, LAWRENCE F  
Address: 10301 SW 69TH AVE  
City-St-Zip: MIAMI, FL 33156

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MICHELSON, LAWRENCE F  
Address: 1550 MADRUGA AVE #120  
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAWRENCE F. MICHELSON

P

03/14/2005

Electronic Signature of Signing Officer or Director

Date