2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M58183

1. Entity Name

LAURIE S. HOLTZ, C.P.A., P.A.



FILED Jan 31, 2006 08:00 AN Secretary of State

Principal Place of Business

1 S.E. THIRD AVE.

TENTH FL

MIAMI, FL 33131 US

Mailing Address

1 S.E. THIRD AVE TENTH FLOOR

MIAMI, FL 33131 US



DO NOT WRITE IN THIS SPACE	DO	NOT	WRITE	IN THIS	SPACE
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01262006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0016934

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HORNIK, PETER F. 1 S.E. THIRD AVE **TENTH FLOOR** MIAMI, FL 33131

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The above named entity submits this statement for the parties obligations of registered agent.	ourpose of changing its registered office or r	eglstered ag <u>e</u> nt, or boti	i, in the State of Florida. I am fa	miliar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and table	if applicable (NOTE: Registered Agent signature	recuired when refristating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		

10.	OT ICERS AND DIFFECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLTZ, LAURIE S. 1 S.E. THIRD AVE., TENTH FLOOR MIAMI, FL
TITLE NAME STREET ADDRESS G/TY-ST-ZIP	1
TITLE NAME Street Address City-St-Zip	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	

U00000408545 02/08/06-80064-015 150.00

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12. Thereby 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: __

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER