


2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 21, 2005 08:00 AM
Secretary of State

DOCUMENT # M60239
 1. Entity Name
 FMS EQUITY CORP.



Principal Place of Business 20660 W. DIXIE HIGHWAY N. MIAMI BEACH, FL 33180	Mailing Address 301 YAMATO RD # 2100 BOCA RATON, FL 33431
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02162005 No Chg-P GR2E034 (10/03)

4. FEI Number 65-0011428	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SELIGSOHN, MICHAEL
 79 NW 108 TERR.
 PLANTATION, FL 33324

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	DP KLOTZ, JAMES A. 3425 SADDLE BROOKE LANE WESTON, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEINSILVER, PAUL 20660 W DIXIE HWY NORTH MIAMI BCH, FL
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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 empowers.

SIGNATURE: _____ Date: 2/17/05 Daytime Phone #: 561-368-5284

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR