2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# M60731

Entity Name: JOHN W. SCHMITZ, P.A.

Current Principal Place of Business:

C/O JOHN W. SCHMITZ ESQ
1101 BRICKELL AVE #1700
MIAMI, FL 33131 US

New Principal Place of Business:

C/O JOHN W. SCHMITZ, ESQ.
1101 BRICKELL AVENUE, SUITE 1700
MIAMI, FL 33131 US

Current Mailing Address:

C/O JOHN W. SCHMITZ ESQ
1101 BRICKELL AVE #1700
MIAMI, FL 33131 US

New Mailing Address:

C/O JOHN W. SCHMITZ, ESQ.
1101 BRICKELL AVENUE, SUITE 1700
MIAMI, FL 33131 US

FEI Number: 65-0009453 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHMITZ, JOHN W. ESQ
1101 BRICKELL AVE., STE. 1700
SUITE 1700
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

JOHN W. SCHMITZ, ESQ.
1101 BRICKELL AVENUE, SUITE 1700
MIAMI, FL 33131 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: JOHN W. SCHMITZ 01/27/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SCHMITZ, JOHN W.,
Address: 375 COCOPLUM RD
City-St-Zip: CORAL GABLES, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: JOHN W. SCHMITZ,
Address: 375 COCOPLUM ROAD
City-St-Zip: CORAL GABLES, FL 33143

Title: VD ( ) Change (X) Addition
Name: LUCILA SCHMITZ,
Address: 375 COCOPLUM ROAD
City-St-Zip: CORAL GABLES, FL 33143

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: JOHN W. SCHMITZ PRES 01/27/2005
Electronic Signature of Signing Officer or Director Date