2008 FOR PROFIT CORPORATION

FILED Apr 14, 2008 08:00 A Secretary of State

, ANNUAL REPORT		
DOCUMENT # M75917 1. Entity Name DAVID BERCUSON, P.A.	, is	
Principal Plans of Principal		
Principal Place of Business 9130 S DADELAND BLVD STE 1800 MIAMI, FL 33156 US	Mailing Address 9130 S DADELAND BLVD STE 1800 MIAMI, FL 33156 US	٠,

01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0041225 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BERCUSON, DAVID P.A. DO NOT WRITE 9130 S DADELAND BLVD 1800 IN THIS SPACE MIAMI, FL 33156 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 U00000897717 /25/08-80058-024 150.00 the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE BERCUSON, DAVID NAME STREET ADDRESS 9130 S DADELAND BLVD, #1800 CITY-ST-ZIP MIAMI, FL 33156 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY+ST-ZIP

12. I hereby certify that the info indicated on this report or s oplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information fall 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 ustee 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 atta

SIGNATURE