



**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000068048</b>						
<small>1. Entity Name</small> SYMPHONY BUILDERS AT THE TIDES, INC.						
<small>Principal Place of Business</small> 1700 NORTH UNIVERSITY DRIVE #302 CORAL SPRINGS, FL 33071	<small>Mailing Address</small> 1700 NORTH UNIVERSITY DRIVE #302 CORAL SPRINGS, FL 33071	  03222005    No Chg-P    CR2E034 (10/03) <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 60%; padding: 2px;"><small>4. FEI Number</small> 65-1031216</td><td style="width: 40%; padding: 2px;"><small>Applied For</small> <input type="checkbox"/> Not Applicable</td></tr><tr><td colspan="2" style="padding: 2px;"><small>5. Certificate of Status Desired</small> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b></td></tr></table>	<small>4. FEI Number</small> 65-1031216	<small>Applied For</small> <input type="checkbox"/> Not Applicable	<small>5. Certificate of Status Desired</small> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<small>4. FEI Number</small> 65-1031216	<small>Applied For</small> <input type="checkbox"/> Not Applicable					
<small>5. Certificate of Status Desired</small> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>						
<b>DO NOT WRITE IN THIS SPACE</b>						
<small>6. Name and Address of Current Registered Agent</small>  LARRY A. ROTHENBERG, P.A. 815 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071		<b>DO NOT WRITE IN THIS SPACE</b>				
<small>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.</small>						
<small>SIGNATURE</small> _____ <small>(NOTE: Registered Agent signature required when reinstating)</small> <small>DATE</small> _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>						
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		<small>9. Election Campaign Financing Trust Fund Contribution.</small> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>				
<b>10. OFFICERS AND DIRECTORS</b>						
<small>TITLE</small>	D	<div style="margin-bottom: 10px;">U00000336672 04/27/05-80134-011 213.75</div> <b>DO NOT WRITE IN THIS SPACE</b>				
<small>NAME</small>	MOSCOVITCH, LEWIS					
<small>STREET ADDRESS</small>	1700 NORTH UNIVERSITY DRIVE #302					
<small>CITY - ST - ZIP</small>	CORAL SPRINGS, FL 33071					
<small>TITLE</small>						
<small>NAME</small>						
<small>STREET ADDRESS</small>						
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<small>CITY - ST - ZIP</small>						
<small>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, without other like empowered.</small>						
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<div style="display: flex; justify-content: space-between;"><div>4/18/05</div><div>954-341-1499</div></div> <div style="display: flex; justify-content: space-between;"><div><small>Date</small></div><div><small>Daytime Phone #</small></div></div>				