


2006

05-01-2006 90385 048 ***150 00

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| DOCUMENT # P000000 13170 | |  | | Secretary of State 05-01-2006 90385 048 ***150.00 | |
| 1. Entity Name PARKS & BRAXTON, P.A. | | | | | |
| DO NOT WRITE IN THIS SPACE | | | | | |
| 2. Principal Place of Business 1041 IVES DAIRY RD | | 3. Mailing Address c/o R. PARKS - 7667 BOSCAINI DRIVE | | | |
| Suite, Apt. #, etc. SUITE 137 | | Suite, Apt. #, etc. | | | |
| City & State MIAMI FLORIDA | | City & State BOYNTON BEACH FL | | 4. FEI Number 22-3742040 | |
| Zip 33179 | Country U.S.A. | Zip 33437 | Country U.S.A. | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| DO NOT WRITE IN THIS SPACE | | | | 7. Name and Address of Current Registered Agent | |
| | | | | Name MICHAEL BRAXTON | |
| | | | | Street Address (P.O. Box Number is Not Acceptable) 2392 PHEASANT LANE | |
| | | | | City WESTON | FL Zip Code 33327 |
| 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 Michael Braxton | | DATE 4/28/2006 | | | |
| January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended AR is \$61.25 Make Check Payable to Florida Department of State | | 9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| P PARKS ANDREW, ESQ 202 LANDINGS BLVD WESTON FL 33327 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| VP BRAXTON, MICHAEL ESQ 2392 PHEASANT LANE WESTON FL 33327 | | | | | |
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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 on an attachment with an address, with all other like empowered | | | | | |
| SIGNATURE: Andrew Parks | | DATE: 4/28/06 (917) 704-6691 | | | |