2005 FOR PROFIT CORPORATION

SIGNATURE AND TYPES OF PRIVILED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

	ANNUAL	REPORT		• • •	🏒 Jan 07,	2005 08:00 A
DOCUMENT # P00000108792					Secr	etary of State
1. Entity Name LAW OFFICE OF LOREN S. GRANOFF, P.A.						
Principal Place 701 S.W. 27 SUITE 810 MIAMI, FL 3	TH AVENUE	Mailing Address 701 S.W. 27TH AVENUE SUITE 810 MIAMI, FL 33135 US			: 45//1 63//1 63//1 63/// 63/// 53/// 53///	OUT OUT OF THE STATE STATE OF THE STATE OF THE STATE OF
С	OO NOT WRITE	CE	01042005 4. FEI Numbe 65-106	01042005 No Chg-P CR2E034 (10/03) 4. FEI Number		
APPELROUTH, STEWART L 999 PONCE DE LEON BLVD, STE 625 CORAL GABLES, FL 33134			DO NOT WRITE IN THIS SPACE			
8. The above the obligat	named entity submits this statement for the tions of registered agent.	a purpose of changing its register	ed office or register	ed agent, or bot	th, in the State of Florida	a. I am famillar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and t	Registere (NOTE: Registere	d Agent signature required	when reinstating)		DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			·	00 May Be ed to Fees		
10.	OFFICERS AND DIR	ECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GRANOFF, LOREN S 701 S.W. 27TH AVENUE, STE. 810 MIAMI, FL 33135	general control of the second control of the			U0000017 <u>01/07/05-8</u> 0	'4026 1041-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			***************************************			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WR	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPA	CE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						·
TITLE NAME STREET ADDRESS CITY+ST-ZIP						
12. I hereby c indicated of the corr changed,	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trusted empower or on an attachment dithyan induress, with	filing does not qualify for the exer and accurate and that my signate ed to execute this report as requir flyother like empowered.	mption stated in Secure shall have the secure 607.	otion 119.07(3)(i ame legal effect Florida Statutes), Florida Statutes, I furn t as if made under oath s; and that my name ap	ther certify that the information; that I am an officer or director pears in Block 10 or Block 11 if 305/54/-9686