
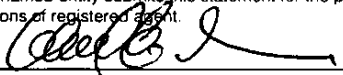



# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90175 018 \*\*\*150.00

<b>DOCUMENT # P00000109033</b> 1. Entity Name <b>MICHAEL E. GORDON FINANCIAL SERVICES, INC.</b>																																																																																																																																																																																									
Principal Place of Business <b>3300 UNIVERSITY DRIVE STE 301</b> <b>CORAL SPRINGS, FL 33065</b>			Mailing Address <b>P.O. BOX 8380</b> <b>CORAL SPRINGS, FL 33075</b>																																																																																																																																																																																						
2. Principal Place of Business - No P.O. Box # <b>5580 NE TRIESTE TERR</b>		3. Mailing Address <b>5580 NE TRIESTE TERR</b>																																																																																																																																																																																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																																																																							
City & State <b>BOCA RATON, FL</b>		City & State <b>BOCA RATON, FL</b>		4. FEI Number <b>65-1057896</b>																																																																																																																																																																																					
Zip <b>33487</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																																																					
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																																																																																																																																																																																							
6. Name and Address of Current Registered Agent  <b>GORDON, MICHAEL E</b> <b>3300 UNIVERSITY DRIVE STE 301</b> <b>CORAL SPRINGS, FL 33065</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) <b>5580 NE TRIESTE TERR</b>  City <b>BOCA RATON</b> <b>FL</b> Zip Code <b>33487</b>																																																																																																																																																																																						
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  <b>MICHAEL E. GORDON</b> <span style="float: right;">4/23/07</span> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																																																									
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																																																																																																						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;"> <b>PD</b>  <b>GORDON, MICHAEL E</b>  <b>P.O. BOX 8380</b>  <b>CORAL SPRINGS, FL 33075</b> </td> <td style="width: 10%; padding: 2px; text-align: right;"> <input type="checkbox"/> Delete         </td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  <b>5580 NE TRIESTE TERR</b>  <b>BOCA RATON, FL 33487</b> </td> <td style="width: 10%; padding: 2px; text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> <tr><td style="padding: 2px;"> </td><td></td><td></td><td style="padding: 2px;"> </td><td></td><td></td></tr> <tr><td style="padding: 2px;">TITLE</td><td></td><td></td><td style="padding: 2px;">TITLE</td><td></td><td></td></tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> </table>						10. 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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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, with all other like empowered.																																																																																																																																																																																									
SIGNATURE:  <b>MICHAEL E. GORDON</b> <span style="float: right;">4/23/07 (561) 893-9338</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																																																									