

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000002984

1. Entity Name
LISA T. BLANK, P.A.



FILED

Jan 24, 2005 08:00 AM
Secretary of State

Principal Place of Business
5950 WEST OAKLAND PARK BLVD STE 310
LAURDERHILL, FL 33313

Mailing Address
5950 WEST OAKLAND PARK BLVD STE 310
LAURDERHILL, FL 33313



DO NOT WRITE IN THIS SPACE

01062005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1072915	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLANK, LISA T
5950 WEST OAKLAND PARK BLVD STE 310
LAURDERHILL, FL 33313

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME BLANK, LISA T
STREET ADDRESS 5950 WEST OAKLAND PARK BLVD STE 310
CITY-ST-ZIP LAURDERHILL, FL 33313

110000191488
01/24/05-80175-018 158.75

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: *Lisa Blank (LISA BLANK)* **Date:** *1/20/05* **Daytime Phone #:** *954-677-0155*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR