

2005 FOR PROFIT CORPORATION ANNUAL REPORT

07-06-2005 90034 019 ***150.00

P01000044553

SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUL 19 AM 11:09

DOCUMENT # P01000044553

1. Entity Name
MARCIA L. GOLDSTEIN, INC.



Principal Place of Business
15687 LOCH MAREE LANE
APT. 2405
DELRAY BCH, FL 33446

Mailing Address
15687 LOCH MAREE LANE
APT. 2405
DELRAY BCH, FL 33446



06302005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
85-1109094

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOLDSTEIN, MARCIA L
15687 LOCH MAREE LANE
APT. 2405
DELRAY BCH, FL 33446

**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 date of registration.

(NOTE: Registered Agent signature required when certificate is filed.)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fee

In accordance with s. 607.188(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GOLDSTEIN, MARCIA L
15687 LOCH MAREE LANE, APT. 2405
DELRAY BCH, FL 33446

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 persons empowered.

SIGNATURE:

Marcia L. Goldstein

6-30-05

561
496 4802

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

DATE

Online Photo ?