


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000076087 1. Entity Name FRANK A. MAISTER, P.A.	
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Principal Place of Business 315 SE. SEVENTH ST. 302 FT. LAUDERDALE, FL 33301	Mailing Address 315 SE. SEVENTH ST. 302 FT. LAUDERDALE, FL 33301
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01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1128894	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  MAISTER, FRANK A 315 SE SEVENTH STREET SUITE 302 FT. LAUDERDALE, FL 33301
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**DO NOT WRITE  
IN THIS SPACE**

B. 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, 2007 Fee will be \$550.00**

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

1000000588785  
01/17/07-80084-022 150.00

## 10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAISTER, FRANK A 315 SE SEVENTH STREET STE 302 FT. LAUDERDALE, FL 33301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/2007  
Date

761-3555  
Daytime Phone #