


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90120 033 ***150.00

DOCUMENT # P01000079362	
1. Entity Name JOHN AND COMPANY, P.A.	

Principal Place of Business 2331 N ST RD 7 STE 214-B LAUDERHILL FL 33313	Mailing Address 2331 N ST RD 7 STE 214-B LAUDERHILL FL 33313
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20027318



1st MOORE CR2E034 (10/04)

2. Principal Place of Business 4000 North State Rd 7 Suite, Apt. #, etc. Ste 402	3. Mailing Address 4000 North State Rd 7 Suite, Apt. #, etc. Ste 402
City & State Lauderdale Lakes	City & State Lauderdale Lakes
Zip 33319	Country USA

4. FEI Number 65-1133107	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent JOHN, DAVE 2331 N SR 7 STE. 214-B FORT LAUDERDALE FL 33313	
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7. Name and Address of New Registered Agent	
Name DAVE JOHN	
Street Address (P.O. Box Number is Not Acceptable) 4000 NORTH STATE RD 7, STE 402	
City LAUDERDALE LAKES FL	Zip Code 33319

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 *Dave John* (NOTE: Registered Agent signature required when reinstating) DATE 4/1/05

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O JOHN, DAVE 2331 NORTH SR 7, STE. 214-B FORT LAUDERDALE FL 33313 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVE JOHN 4000 NORTH STATE RD 7, STE 402 Lauderdale Lakes FL 33319 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Dave John* DATE 4/1/05 DAYTIME PHONE # 954 735 8855