2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 12, 2007 08:00 AM Secretary of State

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1. Entity Name

EVAN M BRAUNSTEIN P.A.



Principal Place of Business

Mailing Address

6672 NW 98TH DRIVE PARKLAND, FL 33076

6672 NW 98TH DRIVE PARKLAND, FL 33076



DO NOT WRITE IN THIS SPACE

01092007 No Chg-P CR2E034 (11/05)

4. FEI Number		Applied For
94-3414569	Г	Not Applicable
5. Certificate of Status Desired	\$8.75	Additional

6. Name and Address of Current Registered Agent

BRAUNSTEIN, EVAN M 6672 NW 98TH DRIVE PARKLAND, FL 33076

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent.	urpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.					
	Signature, typed or printed name of registered agent and title if	applicable (NOTE, Register	od Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST BRAUNSTEIN, EVAN M 6672 NW 98TH DRIVE PARKLAND, FL 33076				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRAUNSTEIN, EVAN M 6672 NW 98TH DRIVE PARKLAND, FL 33076				U00000584351 01/12/07-80034-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-7IP					

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:	ac fue	
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	D