

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90171 048 ***150.00

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01092006 Chg-P CR2E034 (11/05)

DOCUMENT # P02000011883 1. Entity Name JOSEPH A. VECCHIO, JR. P.A.																					
Principal Place of Business 2929 E COMMERCIAL BLVD PH SUITE A FT LAUDERDALE, FL 33308		Mailing Address 2929 E COMMERCIAL BLVD PH SUITE A FT LAUDERDALE, FL 33308																			
2. Principal Place of Business 3000 N. University Dr Suite Apt. #, etc. Suite I		3. Mailing Address 3000 N. University Dr Suite Apt. #, etc. Suite I																			
City & State Coral Springs FL		City & State Coral Springs FL																			
Zip 33065		Zip 33065																			
Country USA		Country USA																			
4. FEI Number 02-0552602		Applied For Not Applicable																			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																			
6. Name and Address of Current Registered Agent VECCHIO, JOSEPH A JR 2929 E COMMERCIAL BLVD PH SUITE A FT LAUDERDALE, FL 33308		7. Name and Address of New Registered Agent Name Same Street Address (P.O. Box Number is Not Acceptable) 3000 N. University Dr Suite I City Coral Springs FL Zip Code 33065																			
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 DATE 1-9-06 <small>(NOTE: Registered Agent signature required when reinstating)</small>																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																			
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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, without other like empowered.																					
SIGNATURE:		1/9/06 9545107484																			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #																			