## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000058789

Entity Name: MELVIN C. MORGENSTERN, P.A.

**FILED** Apr 28, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**Current Principal Place of Business: New Principal Place of Business:** 

GABLES ONE TOWER - SUITE 1275 9400 S. DADELAND BOULEVARD 1320 SOUTH DIXIE HIGHWAY 600

CORAL GABLES, FL 33146 CORAL GABLES, FL 33156

**Current Mailing Address: New Mailing Address:** 

GABLES ONE TOWER - SUITE 1275 PO BOX 144616 1320 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33114

FEI Number: 81-0555824 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORGENSTERN, MELVIN C MORGENSTERN, MELVIN C GABLES ONE TOWER - SUITE 1275 9400 S. DADELAND BOULEVARD 1320 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146 US CORAL GABLES, FL 33156 US

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.

SIGNATURE: 04/28/2007

> Electronic Signature of Registered Agent Date

> > Title:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PTSD ( ) Delete

CORAL GABLES, FL 33146

(X) Change ( ) Addition MORGENSTERN, MELVIN C ESQ MORGENSTERN, MELVIN C ESQ Name: Name:

1320 SOUTH DIXIE HIGHWAY - SUITE 1275 9400 S. DADELAND BOULEVARD - #600 Address: Address:

City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: CORAL GABLES, FL 33156

Title: ( ) Delete Title: (X) Change ( ) Addition Name: MORGENSTERN, NANCY U Name: MORGENSTERN, NANCY U

1320 SOUTH DIXIE HIGHWAY - SUITE 1275 Address: 439 HARDEE ROAD Address: City-St-Zip: CORAL GABLES, FL 33146 CORAL GABLES, FL 33146 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELVIN C. MORGENSTERN **PTSD** 04/28/2007