2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000001852

1. Entity Name

DAVID R FARBSTEIN, P.A.



Principal Place of Business

8010 N. UNIVERSITY DR 2ND FL TAMARAC, FL 33321

Mailing Address

8010 N. UNIVERSITY DR 2ND FL TAMARAC, FL 33321

FILED Apr 19, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

02092007 No Chg-P CR2E034 (11/05)

4. FEI Number 05-0548625

Applied For Not Applicable

5. Certificate of Status Desired

\$8,75 Additional Fee Required

6. Name and Address of Current Registered Agent

FARBSTEIN, DAVID R ESQ 8010 N. UNIVERSITY DR 2ND FL TAMARAC, FL 33321

DO NOT WRITE IN THIS SPACE

8. The above	e named entity submits this statement for the p tions of registered agent.	urpose of changing its register	red office or	egistered agent, or bo	Ih, in the State of Florida. It am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and little in	applicable (NOTE Register	ed Agent signatur	required when (wastating)	DATE
FIL After M	.E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT D FARBSTEIN, DAVID R 8010 N. UNIVERSITY DR 2ND FL TAMARAC, FL 33321	TORS			
TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP		d garandina a		•	NOT WRITE THIS SPACE
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	-	-		. <u>:</u> .	U00000717076 04/30/07-80033-025 150.00

12. I hereby certify that the information supplied with this filling 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 his 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

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR