


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P03000005815					
1. Entity Name MICHAEL JAMES FEHL, P.A.					
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 6135 Vista Linda Lane			3. Mailing Address same		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Boca Raton, Florida			City & State		4. FEI Number 030503886
Zip 33433		Country United States	Zip		
					Applied For <input type="checkbox"/> Not Applicable
			5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
DO NOT WRITE IN THIS SPACE				7. Name and Address of Current Registered Agent	
				Name SPIEGEL & UTRERA, P.A.	
				Street Address (P.O. Box Number is Not Acceptable)	
				1840 Southwest 22 Street, 4th Floor	
				City Miami	FL Zip Code 33145
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. SPIEGEL & UTRERA, P.A.					
SIGNATURE By: Natalia Utrera, Vice President					
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 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					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD Michael J. FehI 6135 Vista Linda Lane Boca Raton, Florida 33433		TITLE NAME STREET ADDRESS CITY - ST - ZIP	400066392034 02/22/06--01036--019 **150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Tisha A. FehI 6135 Vista Linda Lane Boca Raton, Florida 33433		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), 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 on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Michael J. FehI</i>		Michael J. FehI, President		1-13-06 561-756-3772	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

CR2E034B (12/02)