

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011033

FILED
Apr 07, 2004
Secretary of State

Entity Name: MICHAEL S. PERSE, P.A.

Current Principal Place of Business:

201 S. BISCAYNE BLVD., 17TH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

201 S. BISCAYNE BLVD.
SUITE 1700
MIAMI, FL 33131

Current Mailing Address:

201 S. BISCAYNE BLVD., 17TH FLOOR
MIAMI, FL 33131

New Mailing Address:

201 S. BISCAYNE BLVD.
SUITE 1700
MIAMI, FL 33131

FEI Number: 75-3098298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIAM CENTER REGISTERED AGENTS, LLC
201 S. BISCAYNE BLVD., 17TH FLOOR
MIAMI, FL 33131

Name and Address of New Registered Agent:

MIAM CENTER REGISTERED AGENTS, LLC
201 S. BISCAYNE BLVD.
SUITE 1700
MIAMI, FL 33131

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:

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Change (X) Addition
Name: PERSE, MICHAEL S
Address: 201 S. BISCAYNE BLVD., SUITE 1700
City-St-Zip: MIAMI, FL 33131 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL S. PERSE

PSTD

04/07/2004

Electronic Signature of Signing Officer or Director

Date