

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015846

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Entity Name:** DAVID LICHTER & ASSOCIATES, P.A.

**Current Principal Place of Business:**

18305 BISCAYNE BLVD, STE 402  
AVENTURA, FL 33160

**New Principal Place of Business:**

18305 BISCAYNE BLVD, STE 302  
AVENTURA, FL 33160

**Current Mailing Address:**

18305 BISCAYNE BLVD, STE 402  
AVENTURA, FL 33160

**New Mailing Address:**

18305 BISCAYNE BLVD, STE 302  
AVENTURA, FL 33160

**FEI Number:** 30-0151453

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LICHTER, DAVID H PRES  
18305 BISCAYNE BLVD.  
SUITE 402  
AVENTURA, FL 33160 US

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

LICHTER, DAVID H PRES  
18305 BISCAYNE BLVD.  
SUITE 302  
AVENTURA, FL 33160 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:

Electronic Signature of Registered Agent

02/01/2011

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LICHTER, DAVID H PRES  
Address: 18305 BISCAYNE BLVD., SUITE 302  
City-St-Zip: AVENTURA, FL 33160

Title: D  
Name: LICHTER, MAYRA R SECRETA  
Address: 18305 BISCAYNE BLVD., SUITE 302  
City-St-Zip: AVENTURA, FL 33160

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE CASARES

OM

02/01/2011

Electronic Signature of Signing Officer or Director

Date