

FILED  
May 01, 2006 08:00 AM  
Secretary of State

2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

|                                                                      |                                                                                   |
|----------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # P03000019521<br>1. Entity Name<br>STEVEN L. ELLISON, P.A. |  |
|----------------------------------------------------------------------|-----------------------------------------------------------------------------------|

|                                                                              |                                                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------|
| Principal Place of Business<br>211 NORTH KROME AVENUE<br>HOMESTEAD, FL 33030 | Mailing Address<br>211 NORTH KROME AVENUE<br>HOMESTEAD, FL 33030 |
|------------------------------------------------------------------------------|------------------------------------------------------------------|

DO NOT WRITE IN THIS SPACE



04282006 No Chg-P CR2ED34 (11/05)

|                                  |                                                                       |
|----------------------------------|-----------------------------------------------------------------------|
| 4. FEI Number<br>02-0677184      | Applied For<br>Not Applicable                                         |
| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$8.75 Additional<br>Fee Required |

6. Name and Address of Current Registered Agent  
  
CHANEY, ROBERT K  
2100 WEST 76TH ST., SUITE 211  
HIALEAH, FL 33016

DO NOT WRITE  
IN THIS SPACE

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.

SIGNATURE \_\_\_\_\_ (Signature, typed or printed name of registered agent and firm if applicable) (NOT: Registered Agent Signature required when renewing) \_\_\_\_\_ DATE \_\_\_\_\_

|                                                                       |                                                                                                                    |
|-----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2006 Fee will be \$550.00 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be<br>Added to Fees |
|-----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|

10. OFFICERS AND DIRECTORS

|                                                |                                                                      |
|------------------------------------------------|----------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | 0<br>ELLISON, STEVEN L<br>18375 SW 216 STREET<br>MIAMI, FL 331701504 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                      |

U00000553466  
05/15/06-80052-011 158.75

DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like amendments.

SIGNATURE: Steven L. Ellison, Esq. 04/27/06 (305) 246-3544  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #