

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029860

FILED
Apr 19, 2009
Secretary of State

Entity Name: LAW OFFICES OF MITCHELL L. SILVERMAN, P.A.

Current Principal Place of Business:

500 SE 17TH STREET
SUITE 220
FT. LAUDERDALE, FL 33316 US

Current Mailing Address:

P.O. BOX 81-4495
HOLLYWOOD, FL 330814495 US

New Principal Place of Business:

2322 E OAKLAND PARK BLVD.
FLOOR 2
FT. LAUDERDALE, FL 33306 US

New Mailing Address:

FEI Number: 36-4524896 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERMAN, MITCHELL L ESQUIRE
500 SE 17TH STREET #220
FT. LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

SILVERMAN, MITCHELL L ESQUIRE
2322 E OAKLAND PARK BLVD.
FLOOR 2
FT. LAUDERDALE, FL 33306 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: MITCHELL L. SILVERMAN, ESQ.

04/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SILVERMAN, MITCHELL L
Address: P.O. BOX 81-4495
City-St-Zip: HOLLYWOOD, FL 330814495 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MITCHELL L. SILVERMAN

PSTD

04/19/2009

Electronic Signature of Signing Officer or Director

Date