2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047691

Entity Name: LAW OFFICES OF JOSEPH AMINOFF, P.A.

FILED Apr 27, 2005 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
407 LINCO	OFFICES OF JOSEPH AMINOFF, P.A. DLN ROAD STE 9A ACH, FL 33139			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
407 LINCO	OFFICES OF JOSEPH AMINOFF, P.A. DLN ROAD STE 9A ACH, FL 33139			
FEI Number	: FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
C/O LAW 407 LINCO	, JOSEPH ESQ OFFICES OF JOSEPH AMINOFF, P.A. DLN ROAD STE 9A ACH, FL 33139 US			
	e named entity submits this statement for th e of Florida.	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered	Agent -	Date	
Election Ca	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete AMINOFF, JOSEPH ESQ 407 LINCOLN ROAD STE 9A MIAMI BEACH, FL 33139	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JOSEPH AMINOFF PD 04/27/2005