

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073707

Entity Name: MICHAEL J. ALMAN, P.A.

FILED  
Apr 30, 2004  
Secretary of State

**Current Principal Place of Business:**

2450 HOLLYWOOD BLVD., SUITE 401  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

3109 STIRLING ROAD  
101  
FT LAUDERDALE, FL 33312

**Current Mailing Address:**

2450 HOLLYWOOD BLVD., SUITE 401  
HOLLYWOOD, FL 33020

**New Mailing Address:**

17290 N.E 19TH AVENUE  
NORTH MIAMI BEACH, FL 33162

FEI Number: 05-0576132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALMAN, MARTIN H  
17290 NE 19TH AVE.  
N. MIAMI BCH, FL 33162

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

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

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDS ( ) Change (X) Addition  
Name: ALMAN, MICHAEL J  
Address: 3109 STIRLING ROAD #101  
City-St-Zip: FT LAUDERDALE, FL 33312

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 J. ALMAN

PRES

04/30/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date