2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2005 8:00 am Secretary of State

DOCUMENT # P03000076362 1. Entity Name THE LAW OFFICES OF DOV SUSSMAN, P.A.					05-04-2005	90123 005 ***150	0.00	
T375 JACKSONVILLE ST STE 201 137		Mailing Address 1 375-JACKSONVILLE-ST-STE-201 FT -M YER S, FL-33901-					;	
2. Principal P 3507 Suite, Apt.		3. Mailing Address 3507 San Suite, Apt. #, etc.	Luis S	04262005	Chg-P	CR2E034 (10/03)		
	27	City & State		4. FEI Numb	-		plied For	
19mg	Country	Jampa, 7	Country	56-237	6964 of Status Desired	\$8.75 Add	ot Applicable litional	
<i>)36</i> =	6. Name and Address of Current F		45 A		Address of New I	Fee Require	d	
011001111			Name			The state of the s		
ŞUSSMAN, DOV 1375 JACKSONVILLE ST. S TE <u>2</u> 01			Street Ad	Street Address (P.O. Box Number is Not Acceptable). 350-7 San Zuris Str-Let				
FT-MYERS, FL 33901				7 347	Lills 3	77-207		
			City	10-06		FL Zip Cgd	629	
	named entity submits this statement for	the purpose of changing its re	egistered office or	registered agent, or bo	oth, in the State of F			
Ī	ions of registered agent.				4/2	7/05		
SIGNATURE.	Signature, typeo or printed name of registered agent at	nd title if applicable. (NOTE: F	Registered Agent signatur	e required when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Campaign Trust Fund Contrib		\$5.00 May Be Added to Fees				
10.	OFFICERS AND D		11.	ADDITIONS	/CHANGES TO OF	FICERS AND DIRECTOR	S IN 11	
TITLE NAME	PVD SUSSMAN, DOV	Delete	TITLE NAME	PVD		☐ Change	☐ Addition	
STREET ADDRESS	1375 JACKSONVILLE ST STE 20	1	STREET ADDRESS	DUV 50 3507 50	ISS MAI	5 tr-e01		
CITY-ST-ZIP	ET MYERS, FL 339Q1	□ Delete	CITY-ST-ZIP	TAMPA	, 72		- Addison	
NAME		□ Delexe	NAME			☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STREET AODRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			Change	☐ Addition	
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS City-St-Zip					
TITLE		☐ Delete	TITLE	***		☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY+ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP	1		CITY-ST-ZIP					
12 I hambu	Lertify that the information supplied with on this report or supplemental report is poration or the receiver of trustee empor or on an attachment with an address, w	this filing does not available to	1	dia Castina 110 07/01	(i) Fl=:== 0: · ·	16.45		