


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000117663		
1. Entity Name ALAN MARK GOLDBERG P.A.		
Principal Place of Business 17204 NEWPORT CLUB DR. BOCA RATON, FL 33496		Mailing Address 17204 NEWPORT CLUB DR. BOCA RATON, FL 33496
DO NOT WRITE IN THIS SPACE		
		01162006 No Chg-P CR2E034 (11/05)
4. FEI Number 20-0318108		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent GOLDBERG, ALAN 17204 NEWPORT CLUB DR. BOCA RATON, FL 33496		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	P	
NAME	GOLDBERG, ALAN	
STREET ADDRESS	17204 NEWPORT CLUB DR.	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE	VP	
NAME	GOLDBERG, ALAN	
STREET ADDRESS	17204 NEWPORT CLUB DR.	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE	S	
NAME	GOLDBERG, ALAN	
STREET ADDRESS	17204 NEWPORT CLUB DR.	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE	T	
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STREET ADDRESS	17204 NEWPORT CLUB DR.	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 607, 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 empowered.		
SIGNATURE: <u>Alan Goldberg</u> <u>ALAN GOLDBERG</u>		1/20/06 561-213-1803
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #