


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90239 033 ***150.00

DOCUMENT # P03000142557 1. Entity Name DAVID A. MATLUCK, PA			
Principal Place of Business 3100 N OCEAN BLVD UNIT 1604 FT LAUDERDALE FL 33308		Mailing Address 3100 N OCEAN BLVD UNIT 1604 FT LAUDERDALE FL 33308	
2. Principal Place of Business 3200 N OCEAN BLVD		3. Mailing Address 3200 N. OCEAN BLVD	
Suite, Apt. #, etc. 609		Suite, Apt. #, etc. 609	
City & State Ft. Lauderdale, FL		City & State Ft. Lauderdale FL.	
Zip 33308		Zip 33308	
Country BROWARD		Country BROWARD	
4. FEI Number 20-0444499		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MATLUCK, DAVID A 3100 N OCEAN BLVD UNIT 1604 FT LAUDERDALE FL 33308		7. Name and Address of New Registered Agent Name DAVID A. MATLUCK Street Address (P.O. Box Number is Not Acceptable) 3200 N. OCEAN BLVD Apt. # 609 City Ft. Lauderdale FL Zip Code 33308	
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 <u><i>DAVID A. MATLUCK</i></u> DAVID A. MATLUCK DATE 4/19/05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MATLUCK, DAVID A 3100 N OCEAN BLVD, UNIT 1604 FT LAUDERDALE FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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><i>DAVID A. MATLUCK</i></u> DAVID A. MATLUCK		Date 4/19/05 Daytime Phone # 954 568-5121	