2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000148303

1. Entity Name

MARK I. INGBER, C.P.A., P.A.



FILED Apr 23, 2007 08:00 AM Secretary of State

Principal Place of Business

10100 W SAMPLE RD

STE 326

CORAL SPRINGS, FL 33065

Mailing Address

10100 W SAMPLE RD

STE 326

CORAL SPRINGS, FL 33065

US



04192007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-0488448

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

INGBER, MARK I 10100 W. SAMPLE RD STE 326

CORAL SPRINGS, FL 33065-3972

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IN	THIS	SPACE

		urpose of changing its register	ed office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
the obligat	ions of registered agent.			
	Signature, typed or printed name of registered agent and title If	applicable. (NOTE: Registere	d Agent signature required when reinstating)	DATE
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		
10.	OFFICERS AND DIREC	TORS		
NAME STREET ADDRESS CITY-ST-ZIP	DPST INGBER, MARK I 10100 W. SAMPLE RD., STE #326 CORAL SPRINGS, FL 330653973			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				000000723764 05/02/07-90084-010 150.00
TITLE				

DO NOT WRITE IN THIS SPACE

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: 4

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE

CITY-ST-ZIP

STREET ADDRESS CITY+ST-ZIP

Mork Inales President

4/19/07

964-510-0109