

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005 8:00 am
Secretary of State

02-22-2005 90015 010 ***150.00

DOCUMENT # P04000055459					
1. Entity Name RON SITARSKI, P.A.					
Principal Place of Business 1100 S.E. 5TH COURT #7 POMPANO BEACH, FL 33060			Mailing Address 1100 S.E. 5TH COURT #7 POMPANO BEACH, FL 33060		
2. Principal Place of Business 3001 NE 47th Ct., #215 Suite, Apt. #, etc.		3. Mailing Address 3001 NE 47th Ct. #215 Suite, Apt. #, etc.			
City & State Ft. Lauderdale, Fl.		City & State Ft. Lauderdale, Fl.		4. FEI Number 02172005 Chg-P CR2E034 (10/03)	
Zip 33308 Country USA		Zip 33308 Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SITARSKI, RONALD J 1100 S.E. 5TH COURT #7 POMPANO BEACH, FL 33060			7. Name and Address of New Registered Agent Name: <u>Ronald J. Sitarski</u> Street Address (P.O. Box Number is Not Acceptable): <u>3001 NE 47th Ct., #215</u> City: <u>Ft. Lauderdale</u> FL Zip Code: <u>33308</u>		
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>Ronald J. Sitarski</i></u> DATE: <u>2-20-05</u> <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			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: <u>D</u> NAME: <u>SITARSKI, RONALD J</u> STREET ADDRESS: <u>1100 S.E. 5TH COURT #7</u> CITY-ST-ZIP: <u>POMPANO BEACH, FL 33060</u>	<input type="checkbox"/> Delete		TITLE: <u>X</u> NAME: <u>Sitarski, Ronald J.</u> STREET ADDRESS: <u>3001 NE 47th Ct., #215</u> CITY-ST-ZIP: <u>Ft. Lauderdale, FL 33308</u>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<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>Ronald J. Sitarski</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>2-20-05</u> Daytime Phone #: <u>954-316-8997</u>		