


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 07, 2005 8:00 am**  
**Secretary of State**

01-07-2005 90014 044 \*\*\*150.00

<b>DOCUMENT # P04000076430</b> 1. Entity Name <b>WOOD &amp; BRONSTEIN, P.A.</b>																											
Principal Place of Business <b>3310 OVERLOOK ROAD DAVIE, FL 33328</b>		Mailing Address <b>3310 OVERLOOK ROAD DAVIE, FL 33328</b>																									
2. Principal Place of Business <b>7900 Peters Road</b> Suite, Apt. #, etc. <b>Suite B-100</b> City & State <b>Fort Lauderdale, Florida</b> Zip <b>33324</b> Country <b>USA</b>		3. Mailing Address Suite, Apt. #, etc. <i>Same as</i> City & State <i>as</i> Zip Country																									
6. Name and Address of Current Registered Agent  <b>BRONSTEIN, DAVID A 3310 OVERLOOK ROAD DAVIE, FL 33328</b>		7. Name and Address of New Registered Agent Name <i>Same</i> Street Address (P.O. Box Number is Not Acceptable) <b>7900 Peters Road</b> Suite B-100 City <b>Fort Lauderdale, FL</b> Zip Code <b>33324</b>																									
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: <i>David A Bronstein, Reg. Agent, President</i> DATE: <b>1-4-05</b> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating))</small>																											
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																									
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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: <i>David A Bronstein</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <b>1-4-05</b> (954) 358-0444 <small>Daytime Phone #</small>																									

20000357



01042005 Chg-P CR2E034 (10/03)

4. FEI Number **33-1091529** Applied For ☐ Not Applicable ☒

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**