2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 11, 2006 8:00 am Secretary of State

DOCUMENT # P04000125460 1. Entity Name THOMAS A. DVORAK, INC.					01-11-2006 90009 030 ***158.75				
Principal Place	e of Business	Mailing Address							
3001 CORAL FT LAUDERD	SHORES DR ALE, FL 33306	3001 CORAL SHORES DR FT LAUDERDALE, FL 333	06						
					MIN II MA		ai maia (1411 ahi) aibia a iri a i		
Principal Place of Business 3. Mailing Address									
2510 Suite, Apt.	E Octobered Part Blad	2510 F. Oaklo Suite, Apt. #, etc.	and Park	Blag					
эше, Арт.	P, CIU.	Suite, Apr. #, U.C.		010	92006	Chg-P	CR2E034 (11/05)		
City & State		City & State			I Number	••	<u> </u>	pplied For	
Fort La	Country	Zip Landerd	Country	<u>- 4</u>	2-164379	99		ot Applicable	
33306	1 ,	1	locked Str	5. Ce عمد	ertificate of S	tatus Desired	\$8.75 Ad Fee Require		
6. Name and Address of Current Registered Agent				7. Na	me and Add	dress of New R	egistered Agent		
DVORAK	Name	Quorak, Thomas W.							
DVORAK, THOMAS W				Street Address (P.O. Box Number is Not Acceptable) 2510 E. Oakland Pack Blud.					
STUART, I	FL 34994			2310 5		WAC TE	VK UIVOS.		
.}				Fort I made doub. FL 33306					
8. The above named entity summits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.									
the obligations of registered agent. SIGNATURE SIGNATURE STATE THOMAS W. DOOL (NOTE: Registered Agent segrature) (NOTE: Registered Agent segrature) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution				\$5.00 Ma	y Be				
l	**:	•	_	Auded to re					
10.	CFFICERS AND E	DIRECTORS	11.	ADO		ANGES TO OFF	ICERS AND DIRECTOR	IS IN 11	
TFILE	OFFICERS AND E		11.	ADO	TIONS/CH/		N fiance	IS IN 11	
	CFFICERS AND E	DIRECTORS	11.	ADO	TIONS/CH/		N fiance		
THEE NAME	OFFICERS AND EDITION OF THE OF	DIRECTORS	11. TITLE	ADO	TIONS/CH/		N fiance		
TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE	ADO	TIONS/CH/	anges to off and Par and Par-dale, F	N fiance		
THLE NAME STREET AVOITESS DITY-ST-ZIP	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME	ADO	TIONS/CH/		©effinge k Blvd. € 33306	☐ Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE	ADO	TIONS/CH/		©effinge k Blvd. € 33306	☐ Addition	
THEE NAME SIREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete	11. TITLE NAME STREET ADDRESS DITY-SI-ZIP TITLE NAME STREET ADDRESS	ADO	TIONS/CH/		©effinge k Blvd. € 33306	☐ Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete	11. TITLE NAME STREET ADDRESS CATY-SI-ZIP TITLE NAME STREET ADDRESS CATY-SI-ZIP TITLE NAME NAME	ADO	TIONS/CH/		Defenge k Blud. = 33306 Crange	☐ Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete	11. TITLE NAME STREET ADDRESS CATY-SI-ZIP TITLE NAME STREET ADDRESS CATY-SI-ZIP TITLE	ADO	TIONS/CH/		Defenge k Blud. = 33306 Crange	☐ Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete	11. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	ADO	TIONS/CH/		©change k 12-1 vd - 2 33306 □ Change	Addition Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CHY-ST-ZIP THE NAME	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete	11. THE NAME STREET ADDRESS DIY-SI-ZIP THE NAME STREET ADDRESS CIY-SI-ZIP THE NAME STREET ADDRESS CIY-SI-ZIP THE NAME	ADO	TIONS/CH/		Defenge k Blud. = 33306 Crange	☐ Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete	11. TITLE NAME STREET ADDRESS DITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	ADO	TIONS/CH/		©change k 12-1 vd - 2 33306 □ Change	Addition Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	ADO	TIONS/CH/		Change	Addition Addition	
THILE NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP THILE MAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete	11. TITLE NAME STREET ADDRESS DITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	ADO	TIONS/CH/		©change k 12-1 vd - 2 33306 □ Change	Addition Addition	
THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS	ADO	TIONS/CH/		Change	Addition Addition	
THEE NAME SIREEI AYOHESS CITY-ST-ZIP THEE NAME SIREEI AYOHESS CITY-ST-ZIP THEE NAME SIREEI AYOHESS CITY-SI-ZIP	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete Delete Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	ADO	TIONS/CH/		Change	Addition Addition Addition	
THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	ADO	TIONS/CH/		Change	Addition Addition	
THILE NAME SIREEI ADDHESS CITY-ST-ZIP THILE NAME STREEI ADDHESS CITY-ST-ZIP THILE NAME STREET ADDHESS CHY-SI-ZIP THILE NAME STREET ADDHESS CITY-SI-ZIP	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete Delete Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	ADO	TIONS/CH/		Change	Addition Addition Addition	
THEE NAME STREET ANOHESS CITY-ST-ZIP THE NAME STREET ANOHESS CITY-ST-ZIP THEE NAME STREET ANOHESS CITY-ST-ZIP THEE NAME STREET ANOHESS CITY-ST-ZIP THEE NAME	OFFICERS AND EDITS DVORAK, THOMAS A 3001 CORAL SHORES DR	DIRECTORS Delete Delete Delete Delete	11. TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS OTY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	ADO	TIONS/CH/		Change	Addition Addition Addition	

12. Thereby cortify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. If 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 outlit; 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: SIGNATURE STORED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR