

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 25, 2005 8:00 am**  
**Secretary of State**

07-25-2005 90105 038 \*\*\*150.00

**DOCUMENT # P04227**

1. Entity Name  
**BOCA SYSTEMS, INC.**



Principal Place of Business  
**1065 S ROGERS CIR  
BOCA RATON, FL 33487**

Mailing Address  
**1065 S ROGERS CIR  
BOCA RATON, FL 33487**

**20065363**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07192005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

**11-2539082**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GROSS, JOSEPH  
3513 NW 61ST CIRCLE  
BOCA RATON, FL 33496**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME GROSS, JOSEPH  
STREET ADDRESS 3513 NW 61ST CIRCLE  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME GROSS, LARRY  
STREET ADDRESS 6504 LANDINGS COURT  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME KOHN, ROBERT  
STREET ADDRESS 3000 SOUTH OCEAN BLVD.  
CITY-ST-ZIP BOCA RATON, FL 33437

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **86 MACFARLANE DRIVE**  
CITY-ST-ZIP **DELRAY BEACH, FL 33483**

TITLE STD ☐ Delete  
NAME GROSS, JUDITH  
STREET ADDRESS 3513 NW 61ST CIRCLE  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Joseph Gross* **JOSEPH GROSS**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/19/05** **561 206-0103**  
Date Daytime Phone #