2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 01, 2006 8:00 am Secretary of State **DOCUMENT # P05000015864** 02-10-2006 90031 024 ***150.00 IRIS ROSENSTRAUCH, P.A. Mailing Address Principal Place of Business 4100 GALT OCEAN DRIVE, #903 4100 GALT OCEAN DRIVE, #903 FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 3. Mailing Address 2. Principal Place of Business Sulte, Apt. #. etc. Sulte, Apt. #, etc. 01052006 CR2E034 (11/05) 4. 圧 Number City & State Applied For City & State **人0-**2 Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROSENSTRACH, IRIS Street Address (P.O. Box Number Is Not Acceptable) 4100 GALT OCEAN DRIVE, #903 FORT LAUDERDALE, FL. FL. City Zip Code 9. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of recristered agent and talls if applicable (NOTE: Registered Agent signature required when renstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Delete . TITLE TITLE Changa 🔀 ☐ Addition NAME ROSENSTRACH, IRIS ROSENSTRAUCH, IRIS NAME STREET ADDRESS STREET ADDRESS 4100 GALT OCEAN DRIVE, #903 FORT LAUDERDALE, FL 33308 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE me ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete* mle ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Detete mue -- Change - Addition TITLE NUME MAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Change Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-7JP Chante ☐ Addition Delete title TILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P

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12. I hereby certify that the information supplied with this tiling does not quality 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.

02-03-06



FLORIDA DEPARTMENT OF STATE

Division of Corporations

February 14, 2006

IRIS ROSENSTRAUCH, P.A. 4100 GALT OCEAN DRIVE, #903 FORT LAUDERDALE, FL 33308

Subject: IRIS ROSENSTRAUCH, P.A.

Reference Number:

P05000015864

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION