2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000015864

IRIS ROSENSTRAUCH, P.A.



FILED Jan 10, 2007 08:00 AM Secretary of State

Principal Place of Business

4100 GALT OCEAN DRIVE, #903 FORT LAUDERDALE, FL 33308

Mailing Address

4100 GALT OCEAN DRIVE, #903 FORT LAUDERDALE, FL 33308



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01082007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2257304 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

ROSENSTRACH, IRIS 4100 GALT OCEAN DRIVE, #903 FORT LAUDERDALE, FL FL

SIGNATURE.

10.

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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.	

(NOTE: Registered Agent signature required when re-instating)

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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

TITLE ROSENSTRAUCH, IRIS NAME STREET ADDRESS 4100 GALT OCEAN DRIVE, #903 CITY-ST-ZIP FORT LAUDERDALE, FL 33308 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE:

SNING OFFICER OR DIRECTOR

Daytime Phone #