

2006 FOR PROFIT CORPORATION ANNUAL REPORT

07-31-2006 90006020 550.00
P05000016691

2006 OCT 13 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

50023581



07202006 Chg-P CR2E034 (11/05)

DOCUMENT # P05000016691 1. Entity Name LAW Offices of Wites, Kapetan & Friedland, P.A.					
Principal Place of Business 4400 NORTH FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064			Mailing Address 4400 NORTH FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FFI Number			Applied For <input checked="" type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent WITES, MARC A 4400 NORTH FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when replacing) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Partner Marc A. Wites 4400 N. Federal Highway Lighthouse Point, FL 33064 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Partner Alex N. Kapetan 4400 N. Federal Highway Lighthouse Point, FL 33064 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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: Alex N. Kapetan July 26, 2006/954-570-8989					

Page 2 of 2

October 19th, 2006

To whom it may concern:

Please fix doc#P05000016691, there is no changes, received your letter sent back with a letter that there was no changes, please way late fee since we weren't notified and your already have our \$550.00. If you have any question please call our office at 954-570-8989.

Thank you for your time on this matter,

Lisa

Lisa Hubert
Law Offices of Wites, Kapetan, ~~and~~ Friedland, PA

Please remove FEI#
& ✓ ~~FEI#~~ off not applicable
BOX
re move & sign between
wites & Kapetan

