

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000042150

Entity Name: THOMAS P. KRASNER, P.A.

FILED
Feb 03, 2006
Secretary of State

Current Principal Place of Business:

271 189TH STREET
SUNNY ISLES BEACH, FL 33160 US

New Principal Place of Business:

8840 GARLAND AVENUE
SURFSIDE, FL 33154 US

Current Mailing Address:

271 189TH STREET
SUNNY ISLES BEACH, FL 33160 US

New Mailing Address:

8840 GARLAND AVENUE
SURFSIDE, FL 33154 US

FEI Number: 20-2566103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRASNER, THOMAS P
271 189TH STREET
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

KRASNER, THOMAS P
8840 GARLAND AVENUE
SURFSIDE, FL 33154 US

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.

SIGNATURE: THOMAS P. KRASNER

02/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KRASNER, THOMAS P
Address: 271 189TH STREET
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KRASNER, THOMAS P
Address: 8840 GARLAND AVENUE
City-St-Zip: SURFSIDE, FL 33154 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS P. KRASNER

PRES

02/03/2006

Electronic Signature of Signing Officer or Director

Date