2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P05000044143

1. Entity Name SEAN BAKSH, P.A.



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

Principal Place of Business

720 SW 98TH TERR PEMBROKE PINES, FL 33025 Mailing Address

720 SW 98TH TERR PEMBROKE PINES, FL 33025



07062007

No Chg-P

CR2E034 (11/05)

4. FEI Number 34-2042907 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAKSH, SEAN 720 SW 98TH TERR PEMBROKE PINES, FL 33025

SIGNATURE: X

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the ilons of registered agent.	purpose of changing its registered	i office or r	egistered agent, or bo	th, in the State of Florida. I am famillar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and tide if applicable. (NOTE Registered Agent signature required when reinstating)					DATE
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		Election Campaign Finance Trust Fund Contribution.	ing	\$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					
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D BAKSH, SEAN 720 SW 98TH TERR PEMBROKE PINES, FL 33025				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					000000767575 07/10/07-80010-003 150.80
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TIFLE NAME STREET ADDRESS CITY-ST-ZIP		•	-	IN .	THIS SPACE
TITLE NAME STREET ÁDDRESS CITY-ST-ZIP				•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		7			·
12. I hereby certify that the information supplied with Misfilling 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 the 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 trusted embowefed 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 pherylike empowered.					