

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000078791

FILED
Apr 09, 2008
Secretary of State

Entity Name: DR. DAVID J. ABRAMS, P.A.

Current Principal Place of Business:

2780 N.E. 183RD STREET
1905
AVENTURA, FL 33160 US

New Principal Place of Business:

13484 JONQUIL COURT
WELLINGTON, FL 33414 US

Current Mailing Address:

2780 N.E. 183RD STREET
1905
AVENTURA, FL 33160 US

New Mailing Address:

13484 JONQUIL COURT
WELLINGTON, FL 33414 US

FEI Number: 20-2926399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAMS, DAVID J
2780 N.E. 183RD STREET
1905
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

ABRAMS, DAVID J
13484 JONQUIL COURT
WELLINGTON, FL 33414 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: DAVID J. ABRAMS

04/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: ABRAMS, DAVID J
Address: 2780 N.E. 183RD STREET #1905
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ABRAMS, DAVID J
Address: 13484 JONQUIL COURT
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify 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: DAVID J. ABRAMS

PRES

04/09/2008

Electronic Signature of Signing Officer or Director

Date