## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000125860

Entity Name: HILLARY G. BERNSTEIN, P.A.

FILED Apr 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

201 GOLDEN ISLES DR., #410 1609 WEEPING WILLOW WAY HALLANDALE, FL 33009 HOLLYWOOD, FL 33019

Current Mailing Address: New Mailing Address:

201 GOLDEN ISLES DR., #410 1609 WEEPING WILLOW WAY HALLANDALE, FL 33009 HOLLYWOOD, FL 33019

FEI Number: 20-3467541 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BERNSTEIN, HILLARY G
201 GOLDEN ISLES DR., #410
HALLANDALE, FL 33009 US

BERNSTEIN, HILLARY G
1609 WEEPING WILLOW WAY
HOLLYWOOD, FL 33019 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: HILLARY G. BERNSTEIN 04/01/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 PDV
 ( ) Delete

 Name:
 BERNSTEIN, HILLARY G

 Address:
 201 GOLDEN ISLES DR., #410

 City-St-Zip:
 HALLANDALE, FL 33009

 Title:
 T
 ( ) Delete

 Name:
 BERNSTEIN, BONNIE

 Address:
 201 GOLDEN ISLES DR., #410

 City-St-Zip:
 HALLANDALE, FL 33009

 Title:
 S
 ( ) Delete

 Name:
 BERNSTEIN, STACEY

 Address:
 201 GOLDEN ISLES DR., #410

 City-St-Zip:
 HALLANDALE, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDV (X) Change ( ) Addition
Name: BERNSTEIN, HILLARY G
Address: 1609 WEEPING WILLOW WAY
City-St-Zip: HOLLYWOOD, FL 33019

Title: T (X) Change ( ) Addition

Name: BERNSTEIN, BONNIE
Address: 1609 WEEPING WILLOW WAY
City-St-Zip: HOLLYWOOD, FL 33019

Title: S (X) Change ( ) Addition

Name: BERNSTEIN, STACEY
Address: 1609 WEEPING WILLOW WAY
City-St-Zip: HOLLYWOOD, FL 33019

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: HILLARY G. BERNSTEIN PDV 04/01/2006