2007 FOR PROFIT CORPORATION

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ANNUAL REPURI					Mar 25, 2007 08:0			
1. Entity Nam	MENT # P050 m. stein, p.a.	0016269	00				Secret	ary of Sta
Principal Place 1342 BEACO WELLINGTON		•	Mailing Address 1342 BEACON CIRCLE WELLINGTON, FL 33414			11 161 3 1111 11 811 1631 1 1 1	AL IIFIA BIITA YELD BII	IA FRIM BENDAN IN INFI
			02022007	No Chg-P	CR2E034 (
· D	O NOT W	CE	4. FEI Numbe 20-467		CIVELUSA (Applied For Not Applicable		
	6. Name and Address	,				of Status Desired		75 Additional Required
						NOT W		
	named entity submits this tions of registered agent.	statement for the	purpose of changing its registe	ered office or registe	red agent, or bot	h, in the State of Flo	orida. I am famili	ar with, and accept
SIGNATURE_								
	Signature, typed or printed name of E NOW!!! FEE IS \$1 ay 1, 2007 Fee will	50.00	S. Election Campaign Fin Trust Fund Contribution		i.00 May Be		DATE	
10.	T	ICERS AND DIRE	CTORS	_				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEIN, GREGG M 1342 BEACON CIRCL WELLINGTON, FL 33							1 5, 4
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					•		. •	٠.
TITLE NAME STREET ADDRESS CITY-ST-ZIP								

12. Thereby 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: _

SIGNATURE MAD TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-350-9461

Daytime Phone #