

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26483

**FILED
Feb 17, 2005
Secretary of State**

Entity Name: NASSAU RESEARCH ASSOCIATES INC.

Current Principal Place of Business:

1290 WESTON RD.
STE. 316
FT LAUDERDALE, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

1290 WESTON RD.
STE 316
FT LAUDERDALE, FL 33326 US

New Mailing Address:

FEI Number: 11-2500793 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SLIVKA, MICHAEL A., ESQ.
1290 WESTON RD.
SUITE 314
FT. LAUDERDALE, FL 33326 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: COHEN, BRUCE J.,
Address: 2775 PADDOCK RD.
City-St-Zip: FT. LAUDERDALE, FL

Title: VSD () Delete
Name: COHEN, LINDA W.,
Address: 2775 PADDOCK RD.
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRUCE J. COHEN

PRES

02/17/2005

Electronic Signature of Signing Officer or Director

_____ Date