## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000029173

Entity Name: DR. LEE S. BARBACH, P.A.

FILED Apr 27, 2006 Secretary of State

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

20754 WEST DIXIE HIGHWAY 16585 NW 2ND AVENUE AVENTURA, FL 33180

SUITE 300

MIAMI, FL 33169

**Current Mailing Address: New Mailing Address:** 

3530 MYSTIC POINTE DRIVE 3029 NE 183 LANE AVENTURA, FL 33160

# 1015

AVENTURA, FL 33180

FEI Number: 65-0402002 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:

BARBACH, LEE S BARBACH, LEE S 3029 NE 183 LANE 3530 MYSTIC POINTE DRIVE AVENTURA, FL 33160 US # 1015

AVENTURA, FL 33180 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: 04/27/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: **PSD** (X) Change ( ) Addition

BARBACH, LEE S Name: Name: BARBACH, LEE S

3530 MYSTIC POINTE DRIVE # 1015 3029 NE 183 LANE Address: Address:

City-St-Zip: AVENTURA, FL 33160 City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: DR. LEE S. BARBACH **PSD** 04/27/2006