2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000038850

1. Entity Name DAN ZOHAR, P.A.



FILED
Jan 08, 2007 08:00 AM
Secretary of State

Principal Place of Business

8902 N. DALE MABRY HWY SUITE 111

TAMPA, FL 33614

Mailing Address

8902 N. DALE MABRY HWY SUITE 111

TAMPA, FL 33614



DO NOT WRITE IN THIS SPACE

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01032007	No Chg-P	CR2E034 (11/05)	

4. FEI Number 59-3183895 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZOHAR, DAN 8902 N. DALE MABRY HWY SUITE 111 TAMPA, FL 33614 DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the pations of registered agent,	ourpose of chang	ing its registered office or registered agent, or be	oth, in the State of Florida.	1 am familiar with, an	id accept
SIGNATURE	Signature, typed or printed name of registered agent and title	il applicable.	(NOTE: Registered Agent signature required when reinstating)		IATE	
		· -				

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. PST TITLE ZOHAR, DAN NAME STREET ADDRESS 8902 N. DALE MABRY HWY, SUITE 111 CITY-ST-ZIP TAMPA, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TIT! F NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME

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12. I hereby 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 suppliemental 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 empewered 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:

STREET ADDRESS
CITY-ST-ZIP

on of DAN ZOH

1/3/2007

(813) 935-9448

Daytime Phone