2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

 I hereby certify that the information sub indicated on this report or supplement. of the corporation or the receiphanged, or on an attachmen

Jul 18, 2005 08:00 AM Secretary of State DOCUMENT # P93000049482 1. Entity Name RICHARD CORTES, P.A. Principal Place of Business Mailing Address 7700 SW 115 STREET 7700 SW 115 STREET PINECREST, FL 33156 PINECREST, FL 33156 06302005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0424588 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORTES, RICHARD DO NOT WRITE 7700 SW 115 STREET PINECREST, FL 33156 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 OFFICERS AND DIRECTORS 10. TITLE CORTES, RICHARD NAME STREET ADDRESS 7700 SW 115 STREET //000000373337 07/18/05-80010-024 150.00 PINECREST, FL 33156 CITY-ST-ZIP TITLE NAME STREET ADDRESS C!TY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

led with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information legion 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 increas, with all other like empowered.

(PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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