

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000019820

Entity Name: I. MARK RUBIN, P.A.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

2107 HENDRICKS AVE., STE 210
C/O RUBIN & RUBIN, P.A.
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

P.O. BOX 1975
PALM VALLEY, FL 32004 US

Current Mailing Address:

2107 HENDRICKS AVE
SUITE 210
JACKSONVILLE, FL 32207 US

New Mailing Address:

P.O. BOX 1975
PALM VALLEY, FL 32004 US

FEI Number: 59-3242160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

I. MARK RUBIN
2107 HENDRICKS AVE
SUITE 210
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

I. MARK RUBIN
P.O. BOX 1975
PALM VALLEY, FL 32004 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: I. MARK RUBIN

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RUBIN, I. M.
Address: 2107 HENDRICKS AVE
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RUBIN, I. M.
Address: P.O. BOX 1975
City-St-Zip: PALM VALLEY, FL 32004

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: I. MARK RUBIN

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date