## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000021996

Entity Name: DOLORES GARFINKLE, P.A.

FT LAUDERDALE, FL

City-St-Zip:

FILED Apr 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1024 FAIRFAX LANE 1760 BELL TOWER LANE WESTON, FL 33326 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 1024 FAIRFAX LANE WESTON, FL 33326 FEI Number: 65-0478211 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: GARFINKLE, DOLORES 1024 FAIRFÁX LANE WESTON, FL 33326 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition GARFINKLE, DOLORES Name: Name: 1024 FAIRFAX LANE Address: Address: City-St-Zip: WESTON, FL 33326 US City-St-Zip: Title: Title: () Change () Addition () Delete GARFINKLE, DOLORES R Name: Name: 1024 FAIRFAX LANE Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DOLORES GARFINKLE P 04/05/2009