## **2005 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

DOCUMENT # P94000023892

LOS ABOGADOS OF MARTIN COUNTY, INC.



Principal Place of Business

401 EAST OSCEOLA STREET SUITE 102

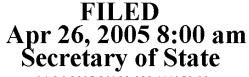
STUART, FL 34994

Mailing Address

401 EAST OF CEOLA STREET

SUITE 102

STUART, FL 34994



04-26-2005 90132 033 \*\*\*150.00



CR2E034 (10/03)

## DO NOT WRITE IN THIS SPACE

	- \$8.75 Additional
65-0492863	Not Applicable
4. FEI Number	Applied For

5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

GOOGE, JR., HOWARD E ESQ. **401 EAST OACEOLA STREET SUITE 102** STUART, FL 34994

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

No Cha-P

04012005

SIGNATURE_	Signature, typed or printed name of registered agent and title	d of the second			DAY.
	Signature, typed or printed name of registered agent and title	# applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		<ol> <li>Election Campaign Finan Trust Fund Contribution.</li> </ol>	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE Name Street address City-St-Zip	D CORNETT, JANE L 4241 S.W. LAUREL OAK TERRACE PALM CITY, FL 34990				
TITLE Name Street address City-St-Zip	D GOOGE, JR., HOWARD E 1721 SW CRANE CREEK AVE PALM CITY, FL 34990				
TITLE Name Street address City-St-Zip				DO	NOT WRITE
TITLE Name Street adoress City-St-Zip				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
of the cor	Of Irus report of stroplemental/report is true a	and accurate and that my signat	ura chall hav	ua tha cama lanal offa	(i), Florida Statutes. I further certify that the information ct as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if

R OR DIRECTOR