
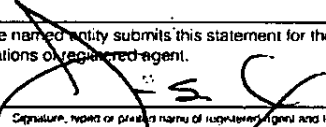
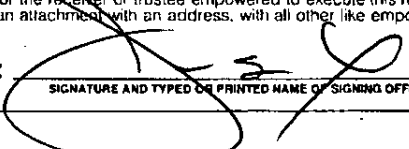


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 13, 2006 8:00 am
Secretary of State

02-22-2006 90013 039 ***150.00

2/1

DOCUMENT # P94000048093 1. Entity Name JACK SCHRAMM COX, P.A.					
Principal Place of Business 9002 SE BRIDGE RD. HOBE SOUND FL 33455 US			Mailing Address 9002 SE BRIDGE RD. HOBE SOUND FL 33455 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0501765	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COX, JACK S 9002 SE BRIDGE RD. HOBE SOUND FL 33455				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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  2/9/06 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-electing)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COX, JACK S 9002 SE BRIDGE RD. HOBE SOUND FL 33455	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 empowered 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: 			3/6/06 772-545-7650 <small>Date Daytime Phone #</small>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



ATTACHMENT
66004622

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 24, 2006

JACK SCHRAMM COX, P.A.
9002 SE BRIDGE RD.
HOBE SOUND, FL 33455 US

Subject: JACK SCHRAMM COX, P.A.

Reference Number: P94000048093

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj

ANNUAL REPORTS SECTION

ATTACHMENT

06004622
#P94000048093

LAW OFFICES
OF

~JACK SCHRAMM COX P.A.~

PRACTICING SINCE
1978

Member of:

Florida Bar

Fifth Circuit of the Federal Courts of Appeal

Eleventh Circuit of the Federal Courts of Appeal

Federal District Court, Southern District of Florida

U.S. Bankruptcy Court, Southern District of Florida

United States Supreme Court

March 7, 2006

Florida Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

Re: Jack Schramm Cox, P.A.
Document No.: P94000048093

Dear Clerk:

Enclosed please find your February 24, 2006 letter advising us that our annual report was not fully executed and therefore has not been filed. Additionally, enclosed is the fully executed annual report.

Very truly yours,

Jack S. Cox

JSC/ch
Enclosure