

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000059389

Entity Name: MICHAEL A. COHEN, P.A.

FILED
Apr 09, 2005
Secretary of State

Current Principal Place of Business:

12555 ORANGE DRIVE
2ND FLOOR
DAVIE, FL 33330

New Principal Place of Business:

20801 BISCAYNE BLVD
SUITE 300
AVENTURA, FL 33180

Current Mailing Address:

12555 ORANGE DRIVE
2ND FLOOR
DAVIE, FL 33330

New Mailing Address:

20801 BISCAYNE BLVD
SUITE 300
AVENTURA, FL 33180

FEI Number: 65-0512459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, MICHAEL A
12555 ORANGE DRIVE
2ND FLOOR
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

COHEN, MICHAEL A
20801 BISCAYNE BLVD
SUITE 300
AVENTURA, FL 33180 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:

04/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COHEN, MICHAEL A
Address: 12555 ORANGE DRIVE, 2ND FLOOR
City-St-Zip: DAVIE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COHEN, MICHAEL A
Address: 20801 BISCAYNE BLVD., SUITE 300
City-St-Zip: AVENTURA, FL 33180

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: MICHAEL A. COHEN

P

04/09/2005

Electronic Signature of Signing Officer or Director

Date