## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## **Secretary of State** DOCUMENT # P94000068716 03-27-2007 90017 035 \*\*\*150.00 1. Entity Name LONDON WITTE & COMPANY, P.A. Principal Place of Business Mailing Address 40042666 3101 N FEDERAL HWY 3101 N FEDERAL HWY SUITE 700 SUITE 700 FT LAUDERDALE, FL 33306 FT LAUDERDALE, FL 33306 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01132007 Chg-P CR2E034 (12/06) Suite 800 Suite 800 Applied For 4. FEI Number City & State City & State 65-0524791 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HIRSCHBERG, EDWARD P Street Address (P.O. Box Number is Not Acceptable) 3101 N FEDERAL HWY SUITE 780 500 FT LAUDERDALE, FL 33306 City 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE HIRSCHBERG, EDWARD CPA NAME NAME 3101 N FEDERAL HWY STREET ADDRESS STREET ADDRESS FT LAUDERDALE, FL 33306 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition TUCK, JOHN CPA NAME NAME 3101 N FEDERAL HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE, FL 33306 ☐ Addition TITLE Delete KURTZ, MARTIN CPA NAME NAME 3101 N FEDERAL HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33306 CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE ENOS, TROY CPA NAME NAME 3101.N.FEDERAL HWY STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL 33306 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 gifter like empowered.

FFICER OF DIRECTOR

FILED Mar 27, 2007 8:00 am

Daytime Phone #