

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000078185

Entity Name: ROTHMAN & TOBIN, P.A.

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

11900 BISCAYNE BLVD, 740
MIAMI, FL 33181

New Principal Place of Business:

11900 BISCAYNE BLVD, SUITE 740
MIAMI, FL 33181

Current Mailing Address:

11900 BISCAYNE BLVD, 740
MIAMI, FL 33181

New Mailing Address:

11900 BISCAYNE BLVD, SUITE 740
MIAMI, FL 33181

FEI Number: 65-0529809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTHMAN, MICHAEL
11900 BISCAYNE BLVD, 740
MIAMI, FL 33181 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: ROTHMAN, MICHAEL
Address: 2724 OAKBROOK DR
City-St-Zip: FT LAUDERDALE, FL 33332

Title: D () Delete
Name: TOBIN, MICHAEL S
Address: 11900 BISCAYNE BLVD. SUITE 740
City-St-Zip: MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: MICHAEL S TOBIN

D

04/03/2009

Electronic Signature of Signing Officer or Director

Date