


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**


FILED
Apr 01, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000086128
1. Entity Name
THE SUSKAUER LAW FIRM, P.A.



Principal Place of Business Mailing Address
1601 FORUM PLACE, SUITE 1200 1601 FORUM PLACE, SUITE 1200
WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE



03292005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0527396 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SUSKAUER, SCOTT I
1601 FORUM PLACE, SUITE 1200
WEST PALM BEACH, FL 33401

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IN THIS SPACE**

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) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

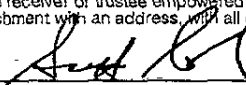
10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SUSKAUER, SCOTT I
STREET ADDRESS	1601 FORUM PLACE, SUITE 1200
CITY-ST-ZIP	WEST PALM BEACH, FL
TITLE	VP
NAME	SUSKAUER, MICHELLE
STREET ADDRESS	1601 FORUM PLACE, SUITE 1200
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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:  Scott I. Suskauer 3/30/05 561-687-7866

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #