

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90029 033 ***150.00

DOCUMENT # P94000091241

1. Entity Name

CHARLES H. COHEN, P.A.



Principal Place of Business

2856 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33306

Mailing Address

2856 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33306
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0542627

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COHEN, CHARLES H
2556 EAST OAKLAND
FORT LAUDERDALE FL 33306

7. Name and Address of New Registered Agent

Name Charles H. Cohen

Street Address (P.O. Box Number is Not Acceptable)

2856 East Oakland Park Blvd.

City Fort Lauderdale

FL

Zip Code

33306

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

1/30/06

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. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPST ☐ Delete
NAME COHEN, CHARLES H
STREET ADDRESS 2856 EAST OAKLAND PARK BLVD.
CITY-ST-ZIP FORT LAUDERDALE FL 33306

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 my address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/06 954-630-8898

DATE

Daytime Phone #

ATTACHMENT 40012392

#P9400009/241
CHARLES H. COHEN, P.A.
ATTORNEY AND COUNSELOR AT LAW
WILLIAM RUGGIERO OF COUNSEL

Charles H. Cohen, Esq.

**2856 E. OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33306
TOLL FREE (877) 747-8487**

**TELEPHONE (954) 630-8898
FACSIMILE (954) 565-8454
TOLL FREE (877) 747-8487**

January 30, 2006

Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, FL 32314

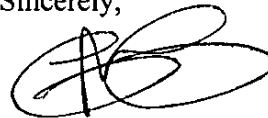
RE: 2006 For Profit Corporation Annual Report

Dear Sir or Madam:

Enclosed please find check No. 9264 in the amount of \$150.00, as payment for the 2006 For Profit Corporation Annual Report filing fee.

If you have any questions please feel free to call me.

Sincerely,



Charles H. Cohen, Esq.

CHC/mp