2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED TIME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 26, 2005 08:00 AM Secretary of State

Daylime Phone ⊭

DOCUMENT # P95000081544 1. Entity Name NATHANSON FAMILY CORPORATION					Se	cretary	y of State
•	e of Business EHAVEN DRIVE V, FL 33469	Mailing Address 17058 WHITEHAVEN DRIVE BOCA RAYON, FL 33469	5. 5. 5. °	4 400/4004 FIX 40		####	I BURN BURNBAN IT NOBY
D	OO NOT WRITE	CE	04212005 4. FEI Number 65-06622 5. Certificate of		CR2E034 (1		
	6. Name and Address of Current Region, M.P. IITEHAVEN DRIVE TON, FL 33496	DO NOT WRITE 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 orbital name of registered agent and life if applicable. NOTE. Registered Agent signature required when refinitating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			neing \$5.	00 May Be ed to Fees	U00000 04/26/05-	1331867 -80031-02	3 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF D NATHANSON, MONTE P 17058 WHITEHAVEN DRIVE BOCA RATON, FL 33469	ECTÓRS					
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12. I hereby certify that the information supplied with this filling does not quality 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 of 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.							