

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90025 050 ***150.00

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04302007 Chg-P CR2E034 (12/06)

DOCUMENT # P96000010875 1. Entity Name ROBERT D. SOLOFF, P.A.																											
Principal Place of Business 888 SE 3RD AVE SUITE 400 FT LAUDERDALE, FL 33316 US		Mailing Address 888 SE 3RD AVE SUITE 400 FT LAUDERDALE, FL 33316 US																									
2. Principal Place of Business - No P.O. Box # 7805 SW 6TH COURT		3. Mailing Address 7805 S.W. 6TH COURT																									
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 																									
City & State PLANTATION, FL		City & State PLANTATION, FL																									
Zip 33324		Zip 33324																									
Country US		Country US																									
4. FEI Number 65-0641230		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent SOLOFF, ROBERT D 888 SE 3RD AVE SUITE 400 FT LAUDERDALE, FL 33316		7. Name and Address of New Registered Agent Name SOLOFF, ROBERT D Street Address (P.O. Box Number is Not Acceptable) 7805 SW. 6TH COURT City PLANTATION FL Zip Code 33324																									
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 <u>Robert D. Soloff</u> 4/29/2007 <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when raising.)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P SOLOFF, ROBERT D</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">888 SE 3RD AVE SUITE 400</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">FT LAUDERDALE, FL</td> </tr> </table>		TITLE	P SOLOFF, ROBERT D	<input type="checkbox"/> Delete	NAME			STREET ADDRESS	888 SE 3RD AVE SUITE 400		CITY-ST-ZIP	FT LAUDERDALE, FL		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P ROBERT D. SOLOFF</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">7805 SW 6TH COURT</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">PLANTATION, FL 33324</td> </tr> </table>		TITLE	P ROBERT D. SOLOFF	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS	7805 SW 6TH COURT		CITY-ST-ZIP	PLANTATION, FL 33324	
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12. I hereby certify that the information supplied with this filing 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 other I/e, empowered.																											
SIGNATURE: <u>Robert D. Soloff</u>		4/29/2007 954-472-0002																									
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>																									