


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P96000023995 |  |
| 1. Entity Name ROBERT J. FRIEDMAN, P.A. | |

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| Principal Place of Business 1150 EAST HALLANDALE BEACH BLVD. SUITE A HALLANDALE, FL 33009 | Mailing Address 1150 EAST HALLANDALE BEACH BLVD. SUITE A HALLANDALE, FL 33009 |
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DO NOT WRITE IN THIS SPACE



07012004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0647828 | 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

**FREIDMAN, ROBERT J
1150 EAST HALLANDALE BEACH BLVD.
SUITE A
HALLANDALE, FL 33009**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | 000000163244 07/06/04-80005-018 550.00 |
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10. OFFICERS AND DIRECTORS

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD FRIEDMAN, ROBERT J 1150 EAST HALLANDALE BEACH BLVD., SUITE A HALLANDALE, FL 33009 |
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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)(f), 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: Robert J. Friedman 7/1/04 954-468-4651

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