2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000030772

Title:

Name:

Address: City-St-Zip:

FILED Jan 17, 2006 Secretary of State

Entity Name: FRANKOWITZ, SALTZMAN & TYTLER, D.O., P.A. **Current Principal Place of Business: New Principal Place of Business:** 6738 W SUNRISE BLVD SUITE 103 PLANTATION, FL 32313 **New Mailing Address: Current Mailing Address:** 6738 W SUNRISE BLVD 7800 W OAKLAND PARK BLVD. SUITE 103 E-214 PLANTATION, FL 33313 US SUNRISE, FL 33351 US FEI Number: 65-0657644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DI CAPUA, JOSEPH J DI CAPUA, JOSEPH J 2061 NW 2ND AVENUE 7800 W OÄKLAND PARK BLVD. 201 E-214 BOCA RATON, FL 33431 US SUNRISE, FL 33351 US 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. SIGNATURE: JOSEPH J DI CAPUA 01/17/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SALTZMAN, DAVID Name: Name: 6738 W SUNRISE BLVD 103 Address: Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: VD Title: Title: () Delete () Change () Addition Name: TYTLER, NEIL B Name: 6738 W SUNRISE BLVD 103 Address: Address: PLANTATION, FL 33313 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition DI CAPUA, JOSEPH Name: Name: 2061 NW 2ND AVENUE #201 Address Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: () Delete Title: () Change () Addition GONZALEZ, MANUEL Name: Name: Address: 2061 NW 2ND AVENUE #201 Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOSEPH J DI CAPUA 0 01/17/2006

() Delete

2061 NW 2ND AVENUE #201

BOCA RATON, FL 33431

SMETS, MICHAEL

() Change () Addition