

2007 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

07 APR 25 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DBK



04232007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0742126	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GARRETT, RICHARD
1221 BRICKELL AVENUE
SUITE 2100
MIAMI, FL 33131

**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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VS
NAME	ROSENBAUM, RICHARD
STREET ADDRESS	1221 BRICKELL AVENUE
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	AT
NAME	HIRSCH, DAVID
STREET ADDRESS	1221 BRICKELL AVENUE 0
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	P
NAME	ALVAREZ, CESAR L
STREET ADDRESS	1221 BRICKELL AVENUE
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/02/07--01056--008 **150.00

**DO NOT WRITE
IN THIS SPACE**

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 like empowered.

SIGNATURE: *David E Hirsch* DAVID E HIRSCH 4/23/07 305-789-5499
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #