

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 15, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000000103

1. Entity Name
MICHAEL P. BENNETT, P.A.



Principal Place of Business

25 SE 2ND AVE
SUITE 808
MIAMI, FL 33131

Mailing Address

25 SE 2ND AVE
SUITE 808
MIAMI, FL 33131



09122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0715936

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BENNETT, MICHAEL
25 SE 2ND AVE STE 808
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 is required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME BENNETT, MICHAEL P
STREET ADDRESS 25 SE 2ND AVE STE 808
CITY-ST-ZIP MIAMI, FL 33131

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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U00000959730
09/15/08-80004-011 550.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/12/08 305-358-9011