

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90286 030 \*\*\*150.00

**DOCUMENT # P97000009439**

1. Entity Name  
**MORRIS ENGELBERG & LAURIE E. MILGRIM, P.A.**



Principal Place of Business  
**3230 STIRLING ROAD  
STE 1  
HOLLYWOOD, FL 33021**

Mailing Address  
**3230 STIRLING ROAD  
STE 1  
HOLLYWOOD, FL 33021**

**60025571**



03272006 Chg-P CR2E034 (11/05)

2. Principal Place of Business  
**4040 Sheridan Street**  
Suite, Apt. #, etc.

3. Mailing Address  
**4040 Sheridan Street**  
Suite, Apt. #, etc.

City & State  
**Hollywood, Florida**

City & State  
**Hollywood, Florida**

4. FEI Number  
**65-0721778**

Applied For  
☐ Not Applicable

Zip Country  
**33021 USA**

Zip Country  
**33021 USA**

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

**6. Name and Address of Current Registered Agent**

**MILGRIM, LAURIE E  
MORRIS ENGELBERG & LAURIE E MILGRIM, P.A.  
3230 STERLING RD STE 1  
HOLLYWOOD, FL 33021**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)  
**4040 Sheridan Street**

City  
**Hollywood**

**FL**

Zip Code  
**33021**

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 **Laurie E. Milgrim, Esq.**

**03/27/2006**

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE VPAS  
NAME ENGELBERG, MORRIS  
STREET ADDRESS 3230 STIRLING ROAD  
CITY-ST-ZIP HOLLYWOOD, FL 33021 ☐ Delete

TITLE DPST  
NAME MILGRIM, LAURIE E  
STREET ADDRESS 3230 STIRLING ROAD  
CITY-ST-ZIP HOLLYWOOD, FL 33021 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS 4040 Sheridan Street  
CITY-ST-ZIP Hollywood, Florida 33021 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS 4040 Sheridan Street  
CITY-ST-ZIP Hollywood, Florida 33021 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 **Laurie E. Milgrim**, Laurie E. Milgrim, Director 03/27/2006 954-966-3900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #