


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000013604	
1. Entity Name MICHAEL R. FLAM, P.A.	

Principal Place of Business 1144 E NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442	Mailing Address 1144 E NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442
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DO NOT WRITE IN THIS SPACE



05222006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0737631	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

**FLAM, MICHAEL R
1144 E NEWPORT CENTER DRIVE
DEERFIELD BEACH, FL 33442**

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 \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FLAM, MICHAEL R 1144 E NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T FLAM, MICHAEL R 1144 E NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC FLAM, MICHAEL R 1144 E NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FLAM, MICHAEL R 1144 E NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442
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IN THIS SPACE

100000586176
05/26/06-80001-023 150.00

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: <u>Michael R. Flam, Pres. Michael R. Flam, Pres.</u>	Date: <u>5/22/6</u>	Daytime Phone #: <u>954-246-8523</u>
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