

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000051653

Entity Name: GOLDBERG & CATREN, PA

FILED  
Mar 25, 2008  
Secretary of State

**Current Principal Place of Business:**

5353 NORTH FEDERAL HWY., #407  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

5353 NORTH FEDERAL HWY  
SUITE 407  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

5353 NORTH FEDERAL HWY., #407  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

5353 NORTH FEDERAL HWY  
SUITE 407  
FORT LAUDERDALE, FL 33308

FEI Number: 65-0761936

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOLDBERG, DANIEL  
990 NW 53RD STREET  
FT. LAUDERDALE, FL 33309 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: GOLDBERG, SHEILA  
Address: 5353 NORTH FEDERAL HWY., #407  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: SHEILA GOLDBERG

PRES

03/25/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date