

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000075607

1. Entity Name
PA-FLA PLAZA, INC.



Principal Place of Business
406 W. HILLSBORO BLVD
DEERFIELD BEACH, FL 33441

Mailing Address
C/O JOAN I NEUMIRTH
9810 NW 10 ST
PLANTATION, FL 33322 US



02162005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0777901

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MCAVA REAL ESTATE, INC
406 W. HILLBORO BLVD
DEERFIELD BEACH, FL 33441

**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, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
SILVERMAN, JONATHAN
406 W. HILLBORO BLVD
DEERFIELD BEACH, FL 33441

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DV
SILVERMAN, BENEDICT
51 SHERMAN HILL RD SUITE A-104C
WOODBURY, CT 06798

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
ALONSO, STEPHEN M
406 W. HILLBORO BLVD
DEERFIELD BEACH, FL 33441

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000300265
04/12/05-80013-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 #

Jonathan Silverman, Pres