## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000085929

FILED Feb 27, 2006 Secretary of State

Entity Nan	ne: RASKIN F	INANCIAL, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
8105 SOU <sup>-</sup> MIAMI, FL	THWEST 158 F 33193	PLACE				
Current Mailing Address:			New Maili	New Mailing Address:		
8105 SOU <sup>-</sup> MIAMI, FL	ΓHWEST 158 F 33193	PLACE				
FEI Number:	65-0785692	FEI Number Applied For ( )	FEI Number Not App	icable ( ) Certificate o	f Status Desired ( )	
Name and	Address of Co	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
RASKIN, E 8105 SW 1 MIAMI, FL	58 PLACE					
The above in the State		ubmits this statement for the p	urpose of changing i	ts registered office or regis	stered agent, or both,	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Age	nt	Date		
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS	AND DIRECT	ORS:	ADDITION	IS/CHANGES TO OFFICE	ERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () RASKIN, ELLEN 8105 SOUTHWE MIAMI, FL 3319	ST 158 PLACE	Title: Name: Address: City-St-Zip:	()Change()A	ddition	
Title: Name: Address: City-St-Zip:	VP () RASKIN, MELIS 8105 SW 158 PI MIAMI, FL 3319	_ACE	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) A RASKIN, MELISSA B 1561 HARBOUR SIDE DRIVE WESTON, FL 33326	addition	
Title: Name: Address: City-St-Zin:	T () RASKIN, ELLEN 8105 SW 158 PI	ACE	Title: Name: Address: City-St-Zin:	S/T (X) Change () A RASKIN, ELLEN E 8105 SW 158 PLACE	ddition	

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

Title:

Name:

Address:

City-St-Zip:

VP

RASKIN, STEPHANIE L

FORT MYERS, FL 33913

(X) Change ( ) Addition

11011 MILL CREEK WAY, UNIT 1305

SIGNATURE: ELLEN E RASKIN Ρ 02/27/2006

() Delete

RASKIN, STEPHANIE L

8105 SW 158 PLACE

MIAMI, FL 33193

Name:

Address:

City-St-Zip: