

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000091376

Entity Name: LEWIS & KRACOFF, P.A.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

8220 STATE ROAD 84, SUITE 302
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

8220 STATE ROAD 84, SUITE 302
DAVIE, FL 33324

New Mailing Address:

FEI Number: 65-0789525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, ALAN JAY
8220 STATE ROAD 84, SUITE 302
DAVIE, FL 33324 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: PTVD () Delete
Name: JAY LEWIS, ALAN
Address: 8220 STATE ROAD 84, SUITE 302
City-St-Zip: DAVIE, FL 33324

Title: SD () Delete
Name: KRACOFF, ELLEN
Address: 8220 STATE RD 84, SUITE 302
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTVD (X) Change () Addition
Name: LEWIS, ALAN J
Address: 8220 STATE ROAD 84, SUITE 302
City-St-Zip: DAVIE, FL 33324

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: ALAN JAY LEWIS

PRES

04/21/2008

Electronic Signature of Signing Officer or Director

Date