## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000027159

City-St-Zip:

AVENTURA, FL 33180

Entity Name: ROTH AND ROUSSO, P.A.

FILED Apr 27, 2005 Secretary of State

Littly Nai	ile. KOTHAI	ND RO0330, F.A.				
Current Principal Place of Business:				New Principal Place of Business:		
18851 NE 29TH AVE., STE. 900 AVENTURA, FL 33180				18851 NE 29TH AVE STE. 900 AVENTURA, FL 3318	30	
Current Mailing Address:				New Mailing Address:		
18851 NE 29TH AVE., STE. 900 AVENTURA, FL 33180				18851 NE 29TH AVE STE. 900 AVENTURA, FL 33180		
FEI Number:	65-0823726	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
ROTH, LEONARDO A ESQ 3440 HOLLYWOOD BLVD. STE 360 HOLLYWOOD, FL 33021 US The above named entity submits this statement for the purpose of				ROTH, LEONARDO A ESQ 18851 NE 29TH AVE STE 900 AVENTURA, FL 33180 US of changing its registered office or registered agent, or both.		
	of Florida.					
SIGNATURE: LEONARDO A ROTH				04/27/2005		
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ROTH, LEONAF	OOD BLVD., STE 360		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ROUSSO, MAR	OOD BLVD., STE 360		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ROTH, LEONAF	Delete RDO A ESQ.		Title: Name:	( ) Change ( ) Addition	

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

City-St-Zip:

SIGNATURE: LEONARDO A ROTH PD 04/27/2005