


AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999 		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000069036 1. Corporation Name MOSES E. SILFEN, P.A.			
Principal Place of Business 20533 BISCAYNE BLVD., SUITE 468 AVENTURA FL 33180		Mailing Address 20533 BISCAYNE BLVD., SUITE 468 AVENTURA FL 33180	
DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/28/1998			
2. Principal Place of Business 21 22130 Belmar Drive Suite, Apt. #, etc. 22 1205 City & State 23 Boca Raton Florida Zip 24 33433 Country 25 USA		2a. Mailing Address 26 PMB 468 Suite, Apt. #, etc. 27 20533 Biscayne Blvd. City & State 28 Aventura Florida Zip 29 33180 Country 30 USA	
4. FEI Number 65-085-8521		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		10. Name and Address of New Registered Agent 81 Name Moses E. Silfen 82 Street Address (P.O. Box Number is Not Acceptable) 22130 Belmar Drive 83 Apt. # 1205 84 City Boca Raton FL 85 Zip Code 33433	
9. Name and Address of Current Registered Agent SILFEN, MOSES E 20533 BISCAYNE BLVD., SUITE 468 AVENTURA FL 33180		11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE MOSES E. SILFEN DATE 7/15/99 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
12. OFFICERS AND DIRECTORS TITLE DIRECTOR PRESIDENT <input type="checkbox"/> DELETE NAME MOSES E. SILFEN STREET ADDRESS 22130 BELMAR DR. AVE. #1205 CITY-ST-ZIP BOCA RATON FL 33433		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE None <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: SIGNATURE REQUIRED 7/29/99 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

FILED
Jul 22, 1999 8:00 am
Secretary of State

07-22-1999 90012 011 ***150.00



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601946-90016

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ATTORNEY AT LAW

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Member of Florida & New York Bars

July 15, 1999

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

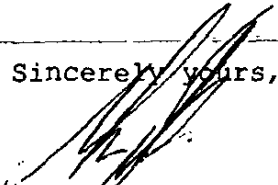
Re: 2nd Notice To File Annual Report
Of Moses E. Silfen, P.A.

Dear Sir/Madam:

Yesterday, I received a 2nd notice to file an annual report from your division. I had never received a first notice and besides, according to both our records my Corporation was formed July 28, 1998. If I had received an initial notice, you can be sure that I would have surely sent it in. Therefore, I ask that your records be reviewed and correct what I sincerely believe to be a computer error.

Enclosed herein, please find a draft of \$150.00 to cover the annual report. Should you require any information, please feel free to contact me at your earliest convenience.

Sincerely yours,


Moses E. Silfen