2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000086702

1. Entity Name
JEFFREY N. IVASHUK, P.A.

Principal Place of Business

727 NE 3RD AVENUE

FT. LAUDERDALE, FL 33304

Mailing Address

P.O. BOX 5549

LIGHTHOUSE POINT, FL 33074

FILED Apr 28, 2006 08:00 AN Secretary of State



DO	NOT	WRITE	IN THIS	SPACE
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04102006 No Chg-P CR28

CR2E034 (11/05)

4. FEI Number 91-1931947 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulfed

6. Name and Address of Current Registered Agent

IVASHUK, JEFFREY N 727 NE 3RD AVENUE FT. LAUDERDALE, FL 33304

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its registerions of registered agent.	ered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept			
SIGNATURE_							
	Signature, typed or printed name of registered agent and title if applicable, (NOTE, Registe	red Agent signature	grijstanien nenw berluper	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IVASHUK, JEFFREY N P.O. BOX 5549 LIGHTHOUSE POINT, FL 33074		000000544695 05/11/06-80045-023 150.00 DO NOT WRITE IN THIS SPACE				
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information							

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

4/23/0

954969442

Daytime Phone it