2005 FOR PROFIT CORPORATION

ANNUAL REPORT **DOCUMENT # P98000101057** 1. Entity Name STEVEN M. CHARCHAT, P.A.



FILED Apr 11, 2005 08:00 AM Secretary of State

Principal Place of Business

848 BRICKELL AVENUE #1040

CITY-ST-ZIP

SIGNATURE:

MIAMI, FL 33131 US

Mailing Address

848 BRICKELL AVENUE #1040

MIAMI, FL 33131 US



DO NOT WRITE IN THIS SPACE				04062005 No Chg-P CR2E034 (10/03)			
				4. FEI Numbe 65-0879	Applied For Not Applicable		
			5. Certificate of Status Desired				
	6. Name and Address of Current Regis	itered Agent		****			
CHARCHAT, STEVEN M ESQ 848 BRICKELL AVENUE, SUITE 1040 MIAMI, FL 33131			DO NOT WRITE IN THIS SPACE				
5. The above the obligat	named entity submits this statement for the plans of registered agent.	ourpose of changing its registere	ed office or re	egistered agent, or bot	h, in the State of Florida.	I am familiar with, and accept	
- CONTACTOR	Signature, typed or printed name of registered agent and title	if applicable (NOTE Registered	erutengie megA b	required when reinstating)		OATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			icing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS	I				
NAME STREET ADDRESS CITY-ST-ZP	DPV CHARCHAT, STEVEN M ESQ 848 BRICKELL AVENUE, SUITE 1040 MIAMI, FL 33131				- noocoosá	7827 043-011 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				•	U4/11/U5-BU	943-UII 15U.UU	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WR	ITE.	
NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPA	CE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP] 				
TITLE NAME STREET ADDRESS							

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