## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 01, 2006 08:00 AM Secretary of State

DOCUMENT	#P980001	108156
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1. Entity Name

JEFFREY L. HOCHMAN, P.A.



Principal Place of Business 2455 E. SUNRISE BLVD SUITE 1000 FORT LAUDERDALE, FL 33304

SIGNATURE:

Mailing Address

2455 E. SUNRISE BLVD

SUITE 1000 FORT LAUDERDALE, FL 33304



DO NOT WRITE IN THIS SPACE					
					4. FEI Number 65-0884305
		_			
	6. Name and Address of Current Regis	tered Agent	· Maria	Secretary visits (2017 A 2 a secretary secretary visits of the secretary visits and the secretary visits of the secretary visi	
HOCHMAN, JEFFREY L 2455 E. SUNRISE BLVD SUITE 1000 FORT LAUDERDALE, FL 33304		DO NOT WRITE IN THIS SPACE			
8. The above the obligati	named entity submits this statement for the poors of registered agent.	ourpose of changing its registere	-	red agent, or both, in the State of Florida. I am famili	ar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	Mannifeable (NOTE Benistere	Agent signature required	d when reinstailing) DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing _ \$5.	0.00 May Be ded to Fees	
18.	OFFICERS AND DIRE	TORS	J .		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOCHMAN, JEFFREY L 470 SW 101 TERR PLANTATION, FL 33324	· · · · · · · · · · · · · · · ·		(10000415472	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000415472 02/11/06-80082-00	9 150.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby indicated of the conchanged	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowers , or on an attachment with an addyers, with a	filing does not qualify for the ex and accurate and that my signa to to execute this report as requi ill other like empowered.	emptions containe ture shall have the ired by Chapter 60	ed in Chapter 119, Florida Statutes. I further certify the same legal effect as if made under oath; that I am a 17, Florida Statutes; and that my name appears in Bio	nat the information n officer or director ack 10 or Block 11 if