

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012512

Entity Name: MITCHELL SENS, P.A.

FILED  
Jan 24, 2008  
Secretary of State

**Current Principal Place of Business:**

8211 WEST BROWARD BLVD  
SUITE 440  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

11825 N.W. 6TH COURT  
PLANTATION, FL 33325 US

**New Mailing Address:**

FEI Number: 65-0893259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SENS, MITCHELL  
8211 WEST BROWARD BLVD  
SUITE 440  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: SENS, MITCHELL H PSD  
Address: 8211 W BROWARD BLVD #440  
City-St-Zip: PLANTATION, FL 33324 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: MITCHELL SENS

PSD

01/24/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date