

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040827

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** BERKOWITZ & ASSOCIATES, P.A.

**Current Principal Place of Business:**

2600 NORTH MILITARY TRAIL  
SUITE 270  
BOCA RATON, FL 33428 US

**New Principal Place of Business:**

2385 EXECUTIVE CENTER DRIVE  
SUITE 190  
BOCA RATON, FL 33431 US

**Current Mailing Address:**

P.O. BOX 970024  
BOCA RATON, FL 33497

**New Mailing Address:**

2385 EXECUTIVE CENTER DRIVE  
SUITE 190  
BOCA RATON, FL 33431

**FEI Number:** 65-0926379

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BERKOWITZ, IAN M ESQ.  
2600 NORTH MILITARY TRAIL  
SUITE 270  
BOCA RATON, FL 33428 US

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

BERKOWITZ, IAN M ESQ.  
2385 EXECUTIVE CENTER DRIVE  
SUITE 190  
BOCA RATON, FL 33431 US

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: IAN M. BERKOWITZ

04/29/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BERKOWITZ, IAN M ESQ.  
Address: 10193 BOCA VISTA DR.  
City-St-Zip: BOCA RATON, FL 33498

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

Title: PD (X) Change ( ) Addition  
Name: BERKOWITZ, IAN M  
Address: 5820 NW 42ND WAY  
City-St-Zip: BOCA RATON, FL 33496

I hereby certify that the information supplied with this filing does not qualify for the 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 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: IAN M. BERKOWITZ

PRES

04/29/2005

Electronic Signature of Signing Officer or Director

Date