2004 FOR PROFIT CORPORATION

FILED Feb 04, 2004 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P99000089014 1. Entity Name CAROL PEREZ, P.A. Principal Place of Business Mailing Address 19333 COLLINS AVE., #804 19333 COLLINS AVE., #804 SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160 01232004 No Chq-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0953732 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KAHN, DONALD J DO NOT WRITE 317 71ST STREET MIAMI BEACH, FL 33141 IN THIS SPACE 8. 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. I am familiar with, and accept

SIGNATORE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered A	gent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financi Trust Fund Contribution.	ng 🔲	\$5.00 May Be Added to Fees	U00000033234 02/05/04-80036-003 150.00
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST PEREZ, CAROLE C/O 9425 HARDING AVENUE SURFSIDE, FL 33154				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, CAROLE C/O 9425 HARDING AVENUE SURFSIDE, FL 33154				·
TITLE NAME STREET ADDRESS CITY-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 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.

the obligations of registered agent.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Applied Far

Not Applicable