## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 17, 2005 08:00 AM Secretary of State

Daytime Phone #

DOCUMENT # S15038				Secretary of State			
1. Entity Name YOUNG, BERMAN, KARPF & GONZALEZ, P.A.							
17071 WES	ce of Business T DIXIE HIGHWAY ACH, FL 33160_	Mailing Address 17071 WEST DIXIE HIGHWAY N MIAMI BEACH, FL 33160	-		-	-	
				01052005	No Chg-P	CR2E034 (10/0	
	O NOT WRITE	in this spa	oe:	4. FEI Numbe 65-023			Applied For Not Applicable
					of Status Desired	Fee Requ	Additional uired
	5. Name and Address of Current Re	gistered Agent			e a communicación y virtuales dels de la se	ili ka shulan sulur 2012	d noving Paradonija
BERMAN, ANDREW S_ 17071 WEST DIXIE HIGWHAY N MIAMI BEACH, FL 33160					NOTW		
is into the c	EACH, 12 33100				ins sp		
8. The above the obligat	named entity submits this statement for the	e purpose of changing its register	ed office or register	ed agent, or bol	th, in the State of Flo	rida. 1 am familiar w	in and accept
SIGNATURL	Signature affect is printed fiber of registered agent and	tile i appicable. (NOTE Registere	d Agent signature required	when reinstating)	** • I	DATE	<del></del> .
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Final     Trust Fund Contribution.		.00 May Be ed to Fees			
10.	OFFICERS AND DI	RECTORS		THE PARTY OF THE P	everen <u>or an every first of the second of the second or an every first of the second or an ev</u>	<del></del>	10.28303833
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KARPF, MITCHELL 17071 W D <u>I</u> XIE HŴY			. <u> </u>	<u> </u>	inananyti tutu — kunji	an Arabayan,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NMB, FL			DO	NOT W		
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TITLE NAME STREET ADDRESS CITY-ST-7IP				aide ann aire agus an an an an an			Alexandra o (A. )

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules I further certify that the information indicated on this report or supplier that 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 of 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: