## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S15038

Entity Name

YOUNG, BERMAN, KARPF & GONZALEZ, P.A.



Principal Place of Business

17071 WEST DIXIE HIGHWAY N MIAMI BEACH, FL 33160 Mailing Address

17071 WEST DIXIE HIGHWAY N MIAMI BEACH, FL 33160 FILED Jan 18, 2007 08:00 AM Secretary of State



01042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0232666 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERMAN, ANDREW S 17071 WEST DIXIE HIGWHAY N MIAMI BEACH, FL 33160

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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 the obligations of registered agent.								
SiGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees	000000590275 01/18/07-80051-0	003 150.00			
10.	OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERMAN, ANDREWS S. 17071 W DIXIE HWY NMB, FL		e i populario de la procesa					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KARPF, MITCHELL 17071 W DIXIE HWY NMB, FL							
THLE NAME STREET ADDRESS CHY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·							
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director								

indicated on this report or supplemental information to 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 redeiver or trust to 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 attach rentwith an appreciate with all other like empowered.

SIGNATURE

TOURE AND TYPED OR INVINTED HAND OF BIGNING OFFICER OR DIRECT

6/06 305-945-18