


2006 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

06 APR 25 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S21297
1. Entity Name
GOTTLIEB & GOTTLIEB ATTORNEYS AT LAW, P.A.




Principal Place of Business
125 NORTH 46TH AVENUE
HOLLYWOOD, FL 33021

Mailing Address
125 NORTH 46TH AVENUE
HOLLYWOOD, FL 33021

\$150.00

DO NOT WRITE IN THIS SPACE



02182006 No Chg-P CR2E034 (11/05) ok

4. FEI Number 65-0237305	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOTTLIEB, BRUCE M
125 NORTH 46TH AVENUE
HOLLYWOOD, FL 33021

DO NOT WRITE 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 the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP GOTTLIEB, BRUCE M 125 NORTH 46TH AVE HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VDS GOTTLIEB, KENNETH A 125 NORTH 46TH AVE HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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DO NOT WRITE IN THIS SPACE

12. I hereby 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 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.

SIGNATURE:  April 11, 2006 (954) 966-7900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #