2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S22065

Name:

Address:

City-St-Zip:

FILED Jun 30, 2005 Secretary of State

Entity Name: SMITH, ORTIZ, GOMEZ AND BUZZI, P.A.						
Current Principal Place of Business:				New Principal Place of Business:		
132 MINOF CORAL GA	RCA AVE. ABLES, FL 33	3134				
Current Mailing Address:				New Mailing Address:		
132 MINOF CORAL GA	RCA AVE. ABLES, FL 33	3134				
FEI Number:	65-0232836	FEI Number Applied For ()	FEI Number Not Ap	oplicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name ar	nd Address	of New Registered Agent:	
CORPORATION COMPANY OF MIAMI 1500 EDWARD BALL BLDG. 100 CHOPIN PLAZA MIAMI, FL 33131 US				JOSE E SMITH 132 MINORCA AVENUE CORAL GABLES CORAL GABLES, FL 33134 US		
	named entity of Florida.	submits this statement for the	purpose of changing	g its register	red office or registered agent, or both,	
SIGNATURE: JOSE E SMITH					06/30/2005	
	Electro	nic Signature of Registered Ac	jent		Date	
		93(2)(b), F.S., the corporation did r	ot receive the prior no	tice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (BUZZI, JULIO 132 MINORCA CORAL GABLI	· ·	Title: Name: Address: City-St-Zip	:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (ORTIZ, FERNA 132 MINORCA CORAL GABLI		Title: Name: Address: City-St-Zip	:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (GOMEZ, ANTO 132 MINORCA CORAL GABLI	, .	Title: Name: Address: City-St-Zip	:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (SMITH, JOSE 132 MINORCA CORAL GABLI	AVENUE	Title: Name: Address: City-St-Zip	:	() Change () Addition	
Title:	() Delete	Title:	D	() Change (X) Addition	

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.

Name:

Address:

City-St-Zip:

BUZZI, JULIO,

132 MINORCA AVENUE

CORAL GABLES, FL 33134

SIGNATURE: ANTONIO E GOMEZ D 06/30/2005