

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S38452

FILED  
Mar 09, 2005  
Secretary of State

Entity Name: CLIFFORD B. AIN ASSOCIATES, P.A.

## Current Principal Place of Business:

20764 W DIXIE HWY  
AVENTURA, FL 331801146 US

## New Principal Place of Business:

## Current Mailing Address:

20764 W DIXIE HWY  
AVENTURA, FL 331801146 US

## New Mailing Address:

FEI Number: 65-0250684

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AIN, CLIFFORD B.  
20764 W DIXIE HWY  
AVENTURA, FL 331801146 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: AIN, CLIFFORD B  
Address: 20764 W DIXIE HWY  
City-St-Zip: AVENTURA, FL 331801146

Title: DST ( ) Delete  
Name: GRUDA, LESTER A  
Address: 20704 WEST DIXIE HWY  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DST (X) Change ( ) Addition  
Name: GRUDA, LESTER A  
Address: 20704 WEST DIXIE HWY  
City-St-Zip: AVENTURA, FL 331801146

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.

SIGNATURE: CLIFFORD B. AIN

DP

03/09/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date