

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S70279

FILED  
Apr 18, 2005  
Secretary of State

**Entity Name:** COHEN, TAUBMAN & COMPANY CERTIFIED PUBLIC ACCOUNTANTS, P.A.

**Current Principal Place of Business:**

2 S UNIVERSITY DR  
STE 327  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

3201 N. E. 183 STREET  
APT. 1401  
AVENTURA, FL 33160 US

**Current Mailing Address:**

2 S UNIVERSITY DR  
STE 327  
PLANTATION, FL 33324 US

**New Mailing Address:**

3201 N. E. 183 STREET  
APT. 1401  
AVENTURA, FL 33160 US

**FEI Number:** 65-0274831

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

COHEN, ALLEN  
2 S UNIVERSITY DR  
STE 327  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

COHEN, ALLEN  
3201 N. E. 183 STREET  
APT. 1401  
AVENTURA, FL 33160 US

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:

04/18/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: COHEN, ALLEN,  
Address: 2 S UNIVERSITY DR STE 327  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPT (X) Change ( ) Addition  
Name: COHEN, ALLEN,  
Address: 3201 N. E. 183 STREET, APT. 1401  
City-St-Zip: AVENTURA, FL 33160

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: ALLEN COHEN

PRES

04/18/2005

Electronic Signature of Signing Officer or Director

Date