2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90098 041 ***150.00

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02272005 Chg-P CR2E034 (10/03)

DOCUMENT # S75636

1. Entity Name
GREENSPAN & GREENSPAN ENTERPRISES, INC.

Principal Place of Business	Mailing Address
KIM MARKS CPA 11900 BISCAYNE BLVD STE 290 N. MIAMI, FL 33181 US	11900 BISCAYNE BLVD 290 N MIAMI, FL 33181 US
2. Principal Place of Business: 17435 73rd CT N.	3. Mailing Address: 17435 73rd CT. N.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Loxahatchee FL	City & State: Loxahatchee FL
Zip: 33470 Country	Zip: 33470 Country

4. FEI Number: 65-0282533 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARKS, KIM
11900 BISCAYNE BLVD
#290
N MIAMI, FL 33181

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GREENSPAN, ROLAND I. 11900 BISCAYNE BLVD #290 N MIAMI, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 17435 73rd Court North Loxahatchee FL 33470
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] Roland Greenspan, President 2/27/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE