


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2006 08:00 AM
Secretary of State

DOCUMENT # V01044 1. Entity Name ATTORNEY ARTHUR B. SMITH, P.A.	
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Principal Place of Business 915 MIDDLE RIVER DRIVE, SUITE 420 GALLERIA PROFESSIONAL BULDING FT LAUDERDALE, FL 33304	Mailing Address 915 MIDDLE RIVER DRIVE, SUITE 420 GALLERIA PROFESSIONAL BULDING FT LAUDERDALE, FL 33304
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01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0300897	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

SMITH, ARTHUR B
915 MIDDLE DRIVE, SUITE 420
GALLERIA PROFESSIONAL BUILDING
FT LAUDERDALE, FL 33304

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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

00000382986
01/12/06-80034-024 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, ARTHUR B 915 MIDDLE RIVER DRIVE, SUITE 420 FT LAUDERDALE, FL 33304
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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: Arthur B. Smith ARTHUR B. SMITH, Pres. 1-3-06 954-564-8844
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #