

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01393

Entity Name: MICHAEL H. GORA, P.A.

FILED
Apr 10, 2005
Secretary of State

Current Principal Place of Business:

1801 N MILITARY TRAIL
SUITE 200
BOCA RATON, FL 33431

New Principal Place of Business:

7563 IMPERIAL DRIVE
SUITE D 502
BOCA RATON, FL 33433

Current Mailing Address:

1801 N MILITARY TRAIL
SUITE 200
BOCA RATON, FL 33431

New Mailing Address:

7563 IMPERIAL DRIVE
SUITE D 502
BOCA RATON, FL 33433

FEI Number: 65-3031985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HRAWG CORP.
1801 N MILITARY TRAIL
SUITE 200
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

MICHAEL H. GORA.
7563 IMPERIAL DRIVE
SUITE D 502
BOCA RATON, FL 33433 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: MICHAEL H. GORA

04/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: GORA, MICHAEL H
Address: 1801 N MILITARY TRAIL
City-St-Zip: BOCA RATON, FL 33431

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: GORA, MICHAEL H
Address: 7563 IMPERIAL DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: PRES () Change (X) Addition
Name: GORA, MICHAEL H
Address: 7563 IMPERIAL DRIVE, SUITE D 502
City-St-Zip: BOCA RATON, FL 33433

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: MICHAEL H. GORA

P/D

04/10/2005

Electronic Signature of Signing Officer or Director

Date