2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # V41727 1. Entity Name MICHAEL GARLICK, P.A. Mailing Address Principal Place of Business 17116 NEWPORT CLUB DR 1515 N FEDERAL HIGHWAY BOCA RATON, FL 33496 SUITE 300 BOCA RATON, FL 33432 01182006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0327142 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARLICK, MICHAEL DO NOT WRITE 1515 NORTH FEDERAL HIGHWAY SUITE 300 IN THIS SPACE BOCA RATON, FL 33432 6. 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. CATÉ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE GARLICK, MICHAEL NAME STREET ADDRESS 17116 NEWPORT CLUB DRIVE CITY-ST-ZIP BOCA RATON, FL 33496 THILE 000000401121 02/02/06-80031-009 150.00 NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this litting 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 it made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute the report as required by Chapter 507, 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 the empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-7IP

GRATURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER OF GRANDENOR

1/21/06 561-999-0606

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FILED

Jan 25, 2006 08:00 AM