## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT #V65953

1. Entity Name

SILVERMAN, WENDER, KOONIN, EPSTEIN, GARCIA & ROZENCWAIG, P.A.



FILED Jan 18, 2007 08:00 AM Secretary of State

Principal Place of Business

21000 NE 28TH AVE

NORTH MIAMI BEACH, FL 33180 US

Mailing Address

21000 NE 28TH AVE

NORTH MIAMI BEACH, FL 33180

US



01052007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0357304 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SILVERMAN, BARRY J 21000 NE 28TH AVE NORTH MIAMI BEACH, FL 33180

## DO NOT WRITE IN THIS SPACE

NORTH MIAMI BEACH, FL 33180			IN THIS SPACE		
<ol> <li>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.</li> </ol>					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TOR\$	1, , , , , , , , , , , ,		·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVERMAN, BARRY J 21000 NE 28TH AVE NORTH MIAMI BCH, FL				. • •
NAME STREET ADDRESS CITY-ST-ZIP	PD WENDER, STEPHEN S 21000 NE 28TH AVE NORTH MIAMI BCH, FL				U00000530088 01/18/07-80042-005 150.00
NAME STREET ADDRESS CITY-ST-ZIP	D KOONIN, MICHAEL M 2100 NE 28TH AVE NORTH MIAMI BCH, FL		0.46	DO	NOT WRITE
TITLE NAME STRLET ADDRESS CHY-ST-ZIP			of the second	IN	THIS SPACE
HITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filling 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 flue 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 of trustee empowhed to execute this report as equired 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, without provided in the control of the corporation of the corporation

SIGNATURE:

TURE AND TYPE DR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephens Wender 1/16/07

305-937-1999

Daytime Phone #