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Feb 19, 1999 8:00 am Secretary of State

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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 637125

1. Corporation Name

Principal Place of Business

BUTLER & WELLBERY, P.A.

665 SE 10TH STREET SUITE 100 DEERFIELD FL 33441 US		665 SE 10TH STREET SUITE 100 DEERFIELD BEACH FL 33441 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/24/1979				
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	•		Appl	ied For
21		26				59-1933082			Not	Applicable
Suite, Apt. a	#, etc.	Suite, Apt. #, etc.			:	5. Certifcate of Status Desired			5 Ad e Req	lditional uired
City & State	•	City & State				6. Election Campaign Financing Trust Fund Contribution		· ·	00 M led to	lay Be Fees
Zip	Country Zip Country 25 29 30			ountry		This corporation owes the current year Intangible Personal Property Tax. Yes				□No _
_,	9. Name and Address of Currer	nt Registered Agent				0. Name and Address of New F	Registered A	gent		
WELLBERY, WILLIAM J. 855 NW 110TH AVENUE CORAL SPRINGS FL 33071				Name Street Address (P.O. Box Number is Not Acceptable) 83						
			84	City				85 2	Zip Co	ode
			64	City			FL	1	_ip	,
office or re agent. I ar	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was autho	nzed by	tne co	ed corporation's	board of directors. I hereby accep	ot the appoin	tment a	s regi	stered
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NOTE: Regi	stered Ager	nt signatu	ure required whe		DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRE		Addition
TITLE	SVD	☐ DELETE	1.1 TITLE						ngo	
NAME	BUTLER, RICHARD L.		1.2 NAME					٠.	_	
STREET ADDRESS	4121 NW 7TH ST.		1.3 STREE		ESS				•	
CITY-ST-ZIP	COCONUT CREEK FL	☐ DELETE	1.4 CITY-S	T-ZIP	_			[] Cha	nge	Addition
TITLE	PTD		2.1 TITLE		1				5~	
NAME	WELLBERY, WILLIAM J.		2.2 NAME							
STREET ADDRESS	855 NW 110TH AVENUE		2.3 STREE		:SS					
CITY-ST-ZIP	CORAL SPRINGS FL	☐ DELETE	2.4 CITY-S 3.1 TITLE	ST•ZIP		· · · · · · · · · · · · · · · · · · ·		Char	nge	☐ Addition
TITLE		- DELETE	-			•				
NAME			3.2 NAME 3.3 STREE	T ለበጥው፣			-	- '		-
STREET ADDRESS			3.4. CITY-S		-33					:
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	21.2EST	+			Cha	nge	☐ Addition
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE		ESS					
CITY-ST-ZIP			4.4 CITY-S							
TITLE		☐ DELETE	5.1 TITLE					Cha	nge	Addition
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	TADORE	ESS					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE					Cha	.nge	☐ Addition
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREE	TADDRE	ESS					

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

954-480-8541