FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State
05-06-1999 90018 044 ***150.00

02731

DOCUMENT # F60717

1. Corporation Name
JACK B. GERBER, P.A.

Principal Place of Business	Mailing Address
10127 S.W. 93 PLACE MIAMI FL 33176 US	9400 S. DADELAND BLVD. PH-5 MIAMI FL 33156 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

2a. Mailing Address [26]
Suite, Apt. #, etc. [27]
City & State [28]
Zip [29] Country [30]

3. Date Incorporated or Qualified
12/31/1981

4. FEI Number
59-2167908
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GERBER, JACK B.
9400 SOUTH DADELAND BLVD
PH-5
MIAMI FL 33156

10. Name and Address of New Registered Agent

[31] Name
[32] Street Address (P.O. Box Number is Not Acceptable)
[33]
[34] City FL [35] Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, Typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME: GERBER, JACK B.		1.2 NAME	
STREET ADDRESS: 10127 SW 93 PLACE		1.3 STREET ADDRESS	
CITY-ST-ZIP: MIAMI FL 33176		1.4 CITY-ST-ZIP	
	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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.

SIGNATURE: Jack B. Gerber Pres 4/19/99 305-670-3070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

CR2E034 (11/98)