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

Mailing Address

MIAMI FL 33131

700

799 BRICKELL DRIVE

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K44047

1. Corporation Name

Principal Place of Business

799 BRICKELL DRIVE

MIAMI FL 33131

700

JONATHAN H. GREEN & ASSOCIATES, P.A.

					11/08/1988	•	_ [
2. Principal Pl	ncipal Place of Business 2a. Mailing Address				4. FEI Number	Apr	plied For	
21	26				65-0083225	Not	t Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A		
22	27				J, Germanic of Childs Debited	Fee Re	quired	
City & State City & State				<u>ئىسىنىنىن</u>	6. Election Campaign Financing	• •	Mày Be' ~ '~	
23	28				Trust Fund Contribution	Added to	o Fees	
Zip	Country	Country Zip Cou			8. This corporation owes the current year			
24	25 29 30)	·	Personal Property Tax.		□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent		
				81 Name				
GREEN, JONATHAN H.				Street Addre	ess (P.O. Box Number is Not Acceptable)			
799 BRICKELL PLAZA								
700								
MIAMI FL 33131				84 City 85 Zip Code				
				City	F	·L ••	,006	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE (DPV	☐ DELETE	1.1 TITLE			☐ Change ~	☐ Addition	
NAME	GREEN, JONATHAN H		1.2 NAME)			j	
STREET ADDRESS			1.3 STREET	ADDRESS		•	Ì	
CITY-ST-ZIP			1.4 CITY-ST	r. Z IP	•			
TITLE	TSC	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition	
NAME	GREEN, JONATHAN H		2.2 NAME	Į			-	
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		2.3 STREET	ADDRESS				
· · · · · · · · · · · · · · · · · · ·	MIAMI FL		2. 4 CITY-S					
CITY-ST-ZIP TITLE	MIMMU FL	DELETE	3.1 TITLE			- Change	Addition	
NAME			3.2 NAME	ł				
}			3.3 STREET	ADDDESO			j	
STREET ADDRESS				ļ.		•	i	
CITY-ST-ZIP			3.4. CITY-S 4.1 TITLE	(-2)P		[] Change	Addition	
TITLE		ا محرواد		Ì		□ auguge		
NAME			4.2 NAME	*********		•	}	
STREET ADDRESS				ADDRESS		•	Į	
CITY-ST-ZIP			4.4 CITY-S1	[-Z]P		Change	- [] Addition	
TITLE			5.1 TITLE 5.2 NAME			T cuality	(*) vadibo()	
NAME			5.2 NAME 5.3 STREET	ADDDESS				
STREET ADDRESS	• • •]			ļ	
CITY-ST-ZIP		F∃ act exc	5.4 CITY-ST 6.1 TITLE	1-cir		Change	Addition	
TITLE		☐ DELETE				☐ criange	☐ ₩000000	
NAME (-	6.2 NAME				Ì	
STREET ADDRESS			6.3 STREET	1				
CITY-ST-ZIP			6.4 CITY-ST		·		لا	
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 suppliemental 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:

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90062 013 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed