SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

HARVEY A. NUSSBAUM, P.A.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90014 013 ***150.00

| DOCUMENT # PO | 95000003551 |
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Mailing Address Principal Place of Business 2000 GLADES RD. 2000 GLADES RD. #110 #110 DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33486 BOCA RATON FL 33486** 3. Date Incorporated or Qualified US us 01/10/1995 4. FEI Number Applied For 2a. Mailing Address Principal Place of Business 65-0547259 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be 6.º Election Campaign Financing City & State ----Added to Fees Trust Fund Contribution 23 28 Country This corporation owes the current year Zin Zìo Country ☐ No Intangible Personal Property. __ Yes 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NUSSBAUM, HARVEY A 82 Street Address (P.O. Box Number is Not Acceptable) 2000 GLADES RD. #110 83 **BOCA RATON FL 33486** Zip Code City 85 84

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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. 1.1 TITLE Change Addition TITLE DELETE 1.2 NAME NUSSBAUM, HARVEY A NAME 2000 GLADES RD. #110 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33486** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change TITLE DELETE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ___ DELETE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIF 4.1 TITLE Change ■ Addition DELETE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE Change Addition TITLE __ DELETE 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change 6.1 TITLE Addition TITLE DELETE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-7IP

14. I hereby certify that the information supplied with this filing foes 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 fustee 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 or an attachment with an address.

SIGNATURE:

8-0737

(2/3)CR2E034 June 30, 1999

Florida Department of State Division of Corporations Annual Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

TO WHOM IT MAY CONCERN:

Please be advised that <u>I never received the 1st Notice</u> for filing the 1999 Profit Corporation Annual Report. Upon receipt of this 2d Notice I immediately checked my records to confirm that I never received the 1st Notice and then called the clerk at (850)987-6059 to advise them I never received the 1st Notice. The clerk instructed me to send this letter and send the check for \$150, which is enclosed.

If you have any questions, please call me.

Sincerely yours

HAŔ√EY A. NUSSBAUM

H/A**N**:Isd