PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000023889**

1. Corporation Name

EDWARD B. DEUTSCH, P.A.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90028 046 ***158.75



Principal Place of Business Mailing Address			1 18611881 118 18411 18811 88111 88111 88111	tinas itimi igiai	ifilf (#11 ifft	
7039 MANDARIN DRIVE 7039 MANDARIN DRIVE BOCA RATON FL 33433 BOCA RATON FL 33433					0.004.05	
				DO NOT WRITE IN THIS	SPACE	
				3. Date Incorporated or Qualifed 03/10/1997		
2. Principal Place of Business	2a, Mailing Address	_		4. FEI Number	An	plied For
				65-0838239	<u> </u>	t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				-\$8.75.A	
22	27			5. Cortificate of Status Desired	Fee Re	I
City & State	City & State		6. Election Campaign Financing	\$5.00	May Be	
23	28		Trust Fund Contribution	Added to	, ,	
Zip Country	Zip C	Zip Country		8. This corporation owes the current year in	tangible	/
25	29 30			Personal Property Tax.		∐No
9. Name and Address of Currer	it Registered Agent	-		10. Name and Address of New Registered	Agent	
DEUTSCH, EDWARD B			81 Name			
7039 MANDARIN DRIVE		82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33433		83				
2007111110111200100		103	}	<u>. ·</u>		
		84	City	FL .	85 Zip C	Code
11. Pursuant to the provisions of Sections 607.050	13 and 607 1509 Elorida Statutos th	a above	a-named como	ration submits this statement for the DUIDOSE O	f changing its	registered
office or registered agent or both in the State	of Florida, Such change was authori	zed by	the corporation	's board of directors. I hereby accept the appo	intment as req	gistered
agent. I am familiar with, and accept the obliga	itions of, Section 607.0505, Florida S	tatutes	i.	·		
SIGNATURE Signature, typed or printed name of registered age:	rt and title if applicable (NOTE: Regist	ered Ager	nt signature required	when reinstating) DATE		
		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
mle P	☐ DELETE 1.	1 TITLE	_ [☐ Change	☐ Addition }
NAME DEUTSCH, EDWARD	1	.2 NAME	1			
STREET ADDRESS 7039 MANDARIN DRIVE	. 1	3 STREET	TADDRESS			1
CITY-ST-ZIP BOCA RATON FL 33433		4 CITY-S	T-ZIP .			
TITLE	☐ DELETE 2	.1 TITLE			Change	☐ Addition
NAME :	the state of the s	2 NAME		No. 1 and the second of the se	-	, [
STREET ADDRESS			TADDRESS			
CITY-ST-ZIP		4 CITY-5	ST-ZIP	·	Change	Addition
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NAME		2 NAME	T 40000000			
STREET ADDRESS			TADDRESS			-
CITY-ST-ZIP		.4. CITY-S .1 TITLE	51-217		☐ Change	Addition
TITLE .		. 2 NAME			_ •	_
	1		T ADDRESS			1
STREET ADDRESS		.4 CITY-S				
TITLE		.1 TITLE			Change	Addition
NAME		2 NAME				
STREET ADDRESS	. 5	.3 STREE	T ADDRESS			
CITY-ST-ZIP	5	4 CITY-S	T-ZIP			
TITLE DOTTE COME OF COME	☐ DELETE 6	.1 TITLE			Change	Addition
NAME STATE STATE TO STATE OF THE STATE OF TH	6	.2 NAME				
STREET ADDRESS	. 16	3 STREE	TADDRESS			1
CITY-ST-ZIP		4 CITY-S	T-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 supplier enal 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR