

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

FILED

Feb 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000046328 (5)

1. Corporation Name

THE LAW OFFICE OF HUGH SHAFRITZ, P.A.

Principal Place of Business

500 GULFSTREAM BLVD., SUITE 210
DELRAY BEACH FL 33483

Mailing Address

500 GULFSTREAM BLVD., SUITE 210
DELRAY BEACH FL 33483

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/22/1997

4. FEI Number

65-0766015

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1 SE 4th Avenue

Suite, Apt. #, etc.

22 212

City & State

23 Delray Beach FL

Zip

24 33483

Country

25 Palm Beach

2a. Mailing Address

26 1 SE 4th Ave

Suite, Apt. #, etc.

27 212

City & State

28 Delray Beach FL

Zip

29 33483

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

SHAFRITZ, HUGH
500 GULFSTREAM BLVD., SUITE 210
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name

Hugh Shafritz

82 Street Address (P.O. Box Number is Not Acceptable)

1 SE 4th Avenue

83

Suite 212

84 City

Delray Beach

FL

85 Zip Code

33483

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

Hugh Shafritz

Signature type or printed name of registered agent and title, if applicable

Hugh Shafritz

(If Registered Agent signature required when reinstating)

2/5/98

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SHAFRITZ, HUGH
500 GULFSTREAM BLVD., SUITE 210
DELRAY BEACH FL 33483

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1 SE 4th Avenue #212
Delray Beach FL 33483

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

Hugh Shafritz

Hugh Shafritz

2/19/98

501-228-7828

CR2E034 (10/97)