

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUN 12 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-06/15/95--01056--016
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # V47000

(7)

1. Corporation Name

~~MEISLER, SMITH & O'HARE, P.A.~~

MEISLER & SMITH, P.A.

Principal Place of Business

1750 UNIVERSITY DR
STE 201
CORAL SPRINGS FL 33065
US

Mailing Address

1750 UNIVERSITY DR
STE 201
CORAL SPRINGS FL 33065
US

2. Principal Place of Business

21 10211 W. Sample Road

Suite, Apt. #, etc.

22 Suite 212

City & State

23 Coral Springs, Florida

Zip

24 33065

Country

25 Broward

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

3. Date Incorporated or Qualified
06/25/1992

3a. Date of Last Report
06/30/1994

4. FBI Number
65-0342523

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SMITH, RONALD J
1750 UNIVERSITY DR
STE 201
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

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

10211 W. Sample Road

83 Suite 212

84 City

Coral Springs

FL

85 Zip Code

33065

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

Ronald J. Smith

RONALD J. SMITH

6/1/95

Signature, typed or printed name of registered agent and the corporation

(DATE) Registered Agent signature required when reappointing

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE STD
NAME SMITH, RONALD J
STREET ADDRESS 9900 W SAMPLE ROAD #200
CITY- ST- ZIP CORAL SPRINGS FL

11 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS 10211 W. Sample Road, #212
14 CITY- ST- ZIP Coral Springs, FL 33065

TITLE VP
NAME O'HARE, EDWARD J
STREET ADDRESS 9900 W SAMPLE ROAD #200
CITY- ST- ZIP CORAL SPRINGS FL

21 TITLE ☒ Change ☐ Addition

22 NAME Delete

23 STREET ADDRESS

24 CITY- ST- ZIP

TITLE PD
NAME MEISLER, MICHAEL C
STREET ADDRESS 9900 W. SAMPLE #200
CITY- ST- ZIP CORAL SPRINGS FL

31 TITLE ☒ Change ☐ Addition

32 NAME

33 STREET ADDRESS 10211 W. Sample Road, #212
34 CITY- ST- ZIP Coral Springs, FL 33065

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this 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 its registered agent, and that I am 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 in attached information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

Michael C. Meisler PRESIDENT

6/1/95

305 752-4344