

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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

04-22-1999 90013 026 ***150.00

DOCUMENT # 269229

1. Corporation Name

THE SIX HUNDRED BUILDING OF HIALEAH, INC.

Principal Place of Business

600 E 25TH ST
HIALEAH FL 33013
US

Mailing Address

C/O W. E. FURR, M.D.
11206 COVER HARBOR DR
CRYSTAL RIVER FL 34428
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/22/1963

FEI Number

59-1115749

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 30 USA

2a. Mailing Address c/o Richard M. Fernandez

26 11077 Biscayne Blvd.

27 Penthouse Suite

28 Miami, FL

29 33161 30 USA

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 the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FURR JR., DR. WALTER E
11206 W COVE HARBOR DRIVE
CRYSTAL RIVER FL 34428

10. Name and Address of New Registered Agent

81 Name

Richard M. Fernandez, Esq.

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

11077 Biscayne Blvd.

83 Penthouse Suite

84 City

Miami

FL

85 Zip Code

33161

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 4/15/99

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE D
NAME FARRELL, JAMES
STREET ADDRESS 600 E 25TH ST
CITY-ST-ZIP HIALEAH, FL 00000

TITLE PD
NAME FURR, WALTER E JR
STREET ADDRESS 11206 W COVE HARBOR DR
CITY-ST-ZIP CRYSTAL RIVER FL 34428

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

14 Apr 99 352.563.0125

CR2E034 (1/98)

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