

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

FILED

Feb 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 482670 (7)

1. Corporation Name
FLANAGAN, ZBAR, TACKETT & ASSOCIATES, P.A.

Principal Place of Business
~~6071 SOUTH FEDERAL HIGHWAY~~
~~FT. LAUDERDALE FL 33316~~

Mailing Address
P.O. BOX 14186
FT. LAUDERDALE FL 33302-4186



2. Principal Place of Business

21 2127 SW 27th Ter
Suite, Apt. #, etc.

22 City & State
23 Ft Lauderdale FL

24 33312 25 USA

2a. Mailing Address

26 P.O. Box 14186
Suite, Apt. #, etc.

27 City & State
28 Ft Lauderdale FL

29 33302 30 USA

3. Date Incorporated or Qualified
08/12/1975

3a. Date of Last Report
05/01/1996

4. FEI Number
59-1609880

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

ZBAR, MARCUS J
2071 S. FEDERAL HWY.
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 2127 SW 27th Ter
84 City
85 Ft. Lauderdale FL 33312

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 *Marcus J. Zbar* *Marcus J. Zbar* 2/14/97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ZBAR, MARCUS J
STREET ADDRESS 2071 S. FEDERAL HWY.
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Marcus J. Zbar
1.3 STREET ADDRESS 2127 SW 27th Ter
1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33312

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 do 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: *Marcus J. Zbar* *Marcus J. Zbar* 2/14/97 954-763-1601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)