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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 563169 1. Corporation Name

MARTIN R. PRESS, P.A.

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90035 047 ***150.00

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Principal Plac	ce of Business	Mailing Address				Birin ibil bibli b	TOTA DIBIL DIBIL	BINKI BIQIK IBBK
BROWARD FINANCIAL CENTRE BROWARD FINANCIAL CENTRE			D¢	· \				
500 E BROWARD BLVD SUITE 1130 500 E BROWARD BLVD SUIT				1	•			
FORT LAUDERDALE FL 33394 FORT LAUDERDAR		FORT LAUDERDALE FL 3339	LE FL 33394		DO NOT WRITE IN THIS SPACE			
				3 .	Date Incorporated or Qualifed	d		
					03/16/1978			
2. Principal F	Place of Business	2a. Mailing Address		4.	FEI Number		Ap	plied For
21	<u> </u>	26	·	_	<u>59-1807020</u>	_ ·	No	ot Applicable
Şuite, Apt.	. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired		\$8.75	Additional
22		27			Certificate of Status Desired	<u> </u>	· Fee Re	equired
City & Sta	te	. City & State		6.	Election Campaign Financing	ı n	\$5.00	May Be
23	·	28			Trust Fund Contribution	<u> </u>	Added	
Zip	Country	Zip	Country	8.	This corporation owes the cu	rrent year Inti	angible	}
24	25		30		Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent			Name and Address of New	Registered /	Agent	
DDC	SS, MARTIN R., ESQ.	•	81 Name		,			Į.
	E BROWARD BLVD		82 Street	Address (F	P.O. Box Number is Not Accep	table)		
				,	T STATE OF THE SELECTION OF STATE	Acres van van van de de	: <u> </u>	1131) <u>21600</u> 1821
	1130		83		16 14 24 24 14 128			
FIL	Lauderdale fl 33394		84 City		(本於基礎的報刊的問題)		85 Zip (· · · · · · · · · · · · · · · · · · ·
normann car	INDUSTRI Francis	trans or many the second	} ```		,	FL	1) '	1
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named	l corporation	n submits this statement for the	e purpose of	changing its	registered
	registered agent, or both, in the State of am familiar with, and accept the obligation			oration's bo	pard of directors. I hereby acce	ept the appoir	ntment as re	gistered
								Į.
SIGNATURE								
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered Agent signature	required when r	einstating)	DATE		
12.	Signature, typed or printed name of registered agent OFFICERS AND		tegistered Agent signature		einstating);, ADDITIONS/CHANGES TO O		D DIRECTO	PRS IN 12
12.	OFFICERS AND				ADDITIONS/CHANGES TO O		D DIRECTO	PRS IN 12
	OFFICERS AND	DIRECTORS	13.					
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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.