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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 594608

1. Corporation Name

JAMES F. COMANDER, P.A.

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90065 041 ***150.00



Principal Place	e of Business	Mailing Address			**************************************	1 01011 BIBH DIBH DI	
8603 S. DIXIE HWY SUITE 400 13250 SW 74 AVE MIAMI FL 33143 MIAMI FL 33156							
					DO NOT WRITE IN THI	S SPACE	
}					3. Date Incorporated or Qualifed 12/07/1978		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	olied For
	5 DINE-HOW	26	<u> </u>		59-1863535	Not	Applicable
Suite Apt.		Suite, Apt. #, etc.		_	5. Certifcate of Status Desired	\$8.75 A	dditional
22 140	り し	27			5. Certificate of Status Desired	Fee Rec	quired
City & Stat	le	City & State			6. Election Campaign Financing	\$5.00	May Be
23 1/1	AMI, FL	28			Trust Fund Contribution	Added to	Fees
Zip 24 331	Zip Country Zip		Count	Country 8. This corporation owes the current year Intangible Personal Property Tax. X Yes			□No
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Registered	d Agent	
	444		8	81 Name			
COMANDER, JAMES F.				32 Street Add	ess (P.O. Box Number is Not Acceptable)		
13250 SW 74 AVE				ou ou mad			
MIA	MI FL 33156		8	33			.
			-	B4 City		. 85 Zip C	ode
i					F :	L _	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the abo	ove-named corp	poration submits this statement for the purpose of	of changing its r	registered
office or r agent. I a	registered agent, or both, in the State of im familiar with, and accept the obligati	tions of, Section 607.0505	da Statut	es.	ion's board of directors. I hereby accept the app	2/24/	a a
SIGNATURE	/ fums /	and the second		116		2/000/	77
	Signate, typed or printed name of registered agent		_	gent signature require		AND DIDECTOR	DC IN 12
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
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NAME.	COMANDER, JAMES F. 13250 SW 74 AVE		1.2 NAM	EET ADDRESS			
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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.

6.4 CITY-ST-ZIP



SICNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR