

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

DOCUMENT # 601033

1. Corporation Name

BIEMER, PACKER & CARTA, P.A.

Principal Place of Business

3001 W DR MARTIN LUTHER KING BOULEVARD
TAMPA FL 33607
US

Mailing Address

3001W DR M. L.KING JR BLVD
TAMPA FL 33607
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BIEMER, JAMES J.
3001 W DR M. L. KING JR BLVD
TAMPA FL 33607

3. Date Incorporated or Qualified

05/27/1969

4. FEI Number

59-1263616

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81

Name

Laden, S. Aaron

82

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

83

3001 W. Dr. ML King Jr Blvd

84

City

Tampa

FL

85

Zip Code

33607

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 SAMUEL AARON LADEN

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/4/99

DATE

12. OFFICERS AND DIRECTORS

TITLE SD ☒ DELETE

NAME BIEMER, JAMES J.
STREET ADDRESS 3001 W DR M. L. KING JR BLVD
CITY-ST-ZIP TAMPA FL

TITLE PD ☒ DELETE

NAME CARTA, MANUEL A.
STREET ADDRESS 3001 W DR M. L. KING JR BLVD
CITY-ST-ZIP TAMPA FL

TITLE TD ☐ DELETE

NAME TAYLOR, FRANK M.
STREET ADDRESS 3001W DR M. L. KING JR BLVD
CITY-ST-ZIP TAMPA FL

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

1.1 TITLE President - Director ☒ Change ☒ Addition

1.2 NAME Arroyo, Jorge
1.3 STREET ADDRESS 3001 W. Dr. ML King Blvd
1.4 CITY-ST-ZIP Tampa FL 33607

2.1 TITLE Secretary - Director ☒ Change ☒ Addition

2.2 NAME Laden, S. Aaron
2.3 STREET ADDRESS 3001 W. Dr. M.L. King Jr Blvd
2.4 CITY-ST-ZIP Tampa FL 33607

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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

3-3-99

DATE

813-870-4206

DAYTIME PHONE #

CR2E034 (11/98)