

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 603617

1. Entity Name
ENGEL & PALGON PROFESSIONAL ASSOCIATION



Principal Place of Business
1266 W. FLAGLER ST.
MIAMI, FL 33135

Mailing Address
1266 W. FLAGLER ST.
MIAMI, FL 33135

FILED
Jul 11, 2008 08:00 AM
Secretary of State



07092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1514145

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ENGEL, DANIEL ESQ
1266 W. FLAGLER ST.
MIAMI, FL 33135

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

000000954173
07/11/08-80002-011 150.00
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ENGEL, DANIEL W.
STREET ADDRESS 1266 W FLAGLER ST
CITY- ST- ZIP MIAMI, FL

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CITY- ST- ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

D. W. Engel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/08
Date

305-643 2400
Daytime Phone #