Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90043 046 ***150.00

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

 Corporation 	MEN 1 # 603891 CHASE & HOFFMAN, P.A.						
Principal Place	of Business	Mailing Address		1 (88)(3 0)(6) 00:60 (6)(0)	HER TREAT THE REAL	41411 41411 61411 4	INIT BIRIL IRDI
•		9400 S DADELAND BLVD		·			
SUITE 600 SUITE 600							
MIAMI FL 33156		MIAMI FL 33156			WRITE IN THIS	SPACE	
				3. Date Incorporated or Qual 11/02/1972	ifed .		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		<u> </u>	plied For
21		26		59-1423692			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desire	d 🔲	\$8.75 A	
22		City & State		Fee.Required			
City & State		⊢ ′		6. Election Campaign Finance Trust Fund Contribution	ing 🗆	\$5.00 Added to	
23	Country	Zip	Country	····	aumont voor Ir		71 663
Zip	25		¬ `	This corporation owes the Personal Property Tax.	current year ii		□No
24	9. Name and Address of Current			10. Name and Address of N	ew Registered		
	5. Name and Address of Current	registered Agent	81 Name				
COHEN,HERBERT JAY				SE, ALAN R.		· · · · · · · · · · · · · · · · · · ·	
9400 S DADELAND BLVD #600			82 Street Ad	dress (P.O. Box Number is Not Acc te 600	ceptable)		
MIAMI FL 33156			83				
			940 84 City	0 S. Dadeland B		85 Zip (Code -
			l Mia	mi :	FI	_ 331	156
11. Pursuant	to the provisions of Sections 6970502 egistered agent, or both in the State of m familia with and accept the bligati	and 607.1508, Florida Statutes	the above-named co	rporation submits this statement for	the purpose o	f changing its	registered
office or re agent. La	egistered agent, or both, in the State of m familiar with and accept the obligati	r Florida. Such change was aut sus of, Section 607.0505, Florid	norized by the corpora la Statutes.	tion's board of directors. Thereby a	ccept the appo	wummeni az rei	jistereu
SIGNATURE	/ am (4)	1-	ALAN R.		17 (5	9 ·	·
SIGNATURE	Signatura, typed or printed name of registered agent	and title if applicable (NOTE: R	legistered Agent signature requ		DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO	OFFICERS A		
TITLE	PD	XXDELETE		TD	_	XIX Change	☐ Addition
NAME	COHEN,HERBERT JAY			OFFMAN, FREDRIC			i
STREET ADDRESS	9400 S DADELAND BLVD		1.3 STREET ADDRESS 9	400 S. Dadeland	Blvd,	Suite	600
CITY-ST-ZIP	MIAMI FL	V-V-		iami, FL 33156		T-1773-01	
TITLE	VSAT	XXDELETE		SD		XX Change	Addition
NAME	CHASE, ALAN R.			HASE, ALAN R.			
STREET ADDRESS	9400 S DADELAND BLVD STE 6	500		400 S. Dadeland		Sutie	600
CITY-ST-ZIP	MIAMI FL 33156			iami, FL <u>=33156</u>		Change	- S
TITLE	D	XXDELETE	3.1 TITLE			☐ Change	Addition
NAME	CHASE, ALAN R	100	3.2 NAME				
STREET ADDRESS	9400 S DADELAND BLVD STE 6	500	3.3 STREET ADDRESS			•	
CITY-ST-ZIP	MIAMI FL 33156		3.4. CITY-ST-ZIP			☐ Change	☐ Addition
TITLE	VAST	XXDELETE	4.1 TITLE			□ cuange	☐ voorgon
NAME	HOFFMAN, FREDRIC A	200	4. 2 NAME				
STREET ADDRESS	9400 S DADELAND BLVD STE 6	900	4.3 STREET ADORESS				
CITY-ST-ZIP	MIAMI FL 33156	VVDELETE	4.4 CITY-ST-ZIP	······································		Change	Addition
TITLE	D CEMAN EDEDDIC A	XXDELETE	5.1 TITLE 5.2 NAME				
NAME	HOFFMAN, FREDRIC A 9400 S DADELAND BLVD STE 6	•00	5.3 STREET ADDRESS		•		
STREET ADDRESS		iuu	5.4 CITY-ST-ZIP				ļ
CITY-ST-ZIP	MIAMI FL 33156	☐ DELETE	6.1 TITLE			Change	Addition
TITLE			6.2 NAME			عوالمال لي	
NAME STREET ADDRESS			6.3 STREET ADDRESS	•			
STREET ADDRESS			= VIII / / / / / / / / / / / / / / / / /				

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 copies 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

SIGNATURE:

STREET ADDRESS