

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morgham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #632488 (3)

1. Corporation Name

DANIEL W. RAAB, P.A.

Principal Place of Business

1320 South Dixie Hwy.
Suite 821
Miami, FL 33146

Mailing Address

1320 South Dixie Hwy.
Suite 821
Miami, FL 33146

3. Date Incorporated or Qualified

08/01/79

3a. Date of Last Report

08/08/96

4. FEI Number

59-1925713

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 has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes

☐ No

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

10. Name and Address of New Registered Agent

RAAB, DANIEL W.
1320 SOUTH DIXIE HIGHWAY
SUITE 821
MIAMI, FLORIDA 33146

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

(Signature of agent or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1

NAME

PD

Raab, Daniel W.

12.2 STREET ADDRESS

1320 South Dixie Hwy. #821

12.3 CITY - ST - ZIP

Miami, FL 33146

☐ DELETE

12.4

NAME

12.5 STREET ADDRESS

12.6 CITY - ST - ZIP

☐ DELETE

12.7

NAME

12.8 STREET ADDRESS

12.9 CITY - ST - ZIP

☐ DELETE

12.10

NAME

12.11 STREET ADDRESS

12.12 CITY - ST - ZIP

☐ DELETE

12.13

NAME

12.14 STREET ADDRESS

12.15 CITY - ST - ZIP

☐ DELETE

12.16

NAME

12.17 STREET ADDRESS

12.18 CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

800002175368

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*****178.75**

14. I do 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.

SIGNATURE:

Daniel W. Raab

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-97

Date

305-284-0008

Daytime Phone

CR2E034 (9/96)