PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 645158 1, Corporation Name

JACK SIEGEL, P.A.

FILED Apr 16, 1999 8:00 am Secretary of State 04-16-1999 90048 023 ***150.00



Principal Place of Business Mailing Address							IBI 1817 BIREI 1	TIMIL MENT MINTE	31811 61811 1681
2301 WEST SAI BLDG 3. SUITE POMPANO BEA	2301 WEST SAMPLE RD BLDG 3. SUITE 2A POMPANO BEACH FL 330	3 3. SUITE 2A			DO NOT WRI	TE IN THIS	SPACE		
US US						3. Date Incorporated or Qualifed 11/01/1979			
a Principal P	lace of Business	2a. Mailing Address				11/01/1975 4. FEI Number		T Ar	pplied For
2. Fillicipal Fi	lace of Business	26				59-2067277		⊢ → ·	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.]		\$8.75	Additional
22		27				5. Certifcate of Status Desired		Fee Re	equired
- City & State	8	- City & State		-		Election Campaign Financing Trust Fund Contribution	Ó.		May Be to Fees
Zip	Country	Zip		ıntry		8. This corporation owes the curr	ent year In		% /
24	25	29	30			Personal Property Tax. 10. Name and Address of New I	Pogletorod	☐ Yes	∑ 40
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New I	registereu	Agent	
SIFG	BEL, JACK								.
2301 W SAMPLE RD				82 Street Address (P.O. Box Number is Not Acceptable)					
1	G 3, SUITE 2A			83					
	PANO BEACH FL 33073	•						0.0 7:-	Codo
	· /			84	City		FI	85 Zip	Code
l office or n	to the provisions of Sections 607.05t egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a	autnorized	d by t	ine corporatioi	oration submits this statement for the n's board of directors. I hereby acce	purpose o pt the appo	f changing its intment as re	registered egistered
SIGNATURE							DATE		
10	Signature, typed or printed name of registered age	ent and title if applicable. (NOTI ND DIRECTORS	E: Registered	Agent	signature required	ADDITIONS/CHANGES TO OF		ND DIRECTO	ORS IN 12
12.	PD OFFICERS A	, DELETE	1.1 TI	MLE		ADDITIONS/OFFINANCES TO GE	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	SIEGEL, JACK	' ;	1.2 N	AME					
STREET ADDRESS	2301 W SAMPLE RD, BLDG 3	. SUITE 2A	1.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	POMPANO BEACH FL 33073		1.4 C	ITY-ST	-ZIP		<u></u>		
TITLE	ST	DELETE	2.1 TI	TLE				Change	Addition
NAME	SIEGEL, JACK		2.2 N	AME					
STREET ADDRESS	2301 W SAMPLE RD, BLDG 3	, SUITE 2A	2.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	POMPANO BEACH FL 33073		_	CITY-ST	r-ziP	<u> </u>		Channa	Addition
TITLE	`	☐ DELETE	3.1 TI					Change	
NAME	•	- · · -		AME.	·	with the second			
STREET ADORESS					ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETÉ	3.4. C	XTY-SI	1-217			Change	Addition
NAME			4. 2 N					- 0	_
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				ITY-ST					
TITLE		DELETE	5.111					☐ Change	☐ Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CITY-ST-ZIP		•	5.4 C	ITY-ST	-ZIP				
TITLE		☐ DELETE	6.1 TI	ITLE			-	Change	☐ Addition
NAME			6.2 N	AME	ļ				
STREET ADDRESS			6.3 S	TREET	ADDRESS				
1	I		1040	en/ or	710				

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: