

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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90281 040 ***158.75

DOCUMENT # 665477

1. Corporation Name

LAW OFFICES OF JEROLD HART, P.A.

Principal Place of Business

Mailing Address

2201 S.W. 115th TERRACE
DAVIE, FL 33325

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4-2-80

2. Principal Place of Business

2a. Mailing Address

21 2201 SW 115 TER

26 P.O. Box 550817

4. FEI Number

59-2010871

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

23 City & State

DAVIE FL

28 City & State

FT. LAUDERDALE, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

24 Zip

Country

33325

USA

29 Zip

Country

33355-0817

USA

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEROLD HART
2201 S.W. 115th TER.
DAVIE, FL 33325

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 607.1508, 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

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

(NOTE: Registered Agent signature required when reinstating)

4-29-99

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PVS ☐ DELETE
NAME HART, JEROLD
STREET ADDRESS 2201 SW 115 TER
CITY-ST-ZIP DAVIE, FL 33325

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DTC ☐ DELETE
NAME HART, JEROLD
STREET ADDRESS 2201 SW 115 TER
CITY-ST-ZIP DAVIE, FL 33325

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE M ☐ DELETE
NAME HART, JEROLD
STREET ADDRESS 2201 SW 115 TER
CITY-ST-ZIP DAVIE, FL 33325

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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

JEROLD HART, PRES.

4-29-99

Date

954-476-2469

Daytime Phone #

CR2E034 (11/98)