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FILED

Jan 24 1996 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 686679 (2)

1. Corporation Name

JOHNSON, ADORNO & MCCALL, CHARTERED

Principal Place of Business

209 NE 95TH ST #1
MIAMI SHORES FL 33138

Mailing Address

209 NE 95TH ST #1
MIAMI SHORES FL 33138



3. Date Incorporated or Qualified
09/05/1980

3a. Date of Last Report
01/27/1995

2. Principal Place of Business

2a. Mailing Address

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4. FEI Number

59-2024781

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCCALL, WALTON C
209 NE 95TH ST #1
MIAMI SHORES FL 33138

81 Name

JOHNSON, STEVEN J.

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

209 NE 95TH ST SUITE ONE

83

84 City

MIAMI SHORES

FL

85 Zip Code

33138

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

Steven J. Johnson

1/18/96

Signature, type or printed name of registered agent and tick if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MCCALL, WALTON C
STREET ADDRESS 209 NE 95 ST. #1
CITY-ST-ZIP MIAMI SHORES, FL 00000

TITLE STD ☐ DELETE

NAME JOHNSON, STEVEN
STREET ADDRESS 209 N.E. 95TH ST. #1
CITY-ST-ZIP MIAMI SHORES FL 33138

TITLE VD ☐ DELETE

NAME MDORNO, MARK
STREET ADDRESS 209 NE 95TH ST STE 1
CITY-ST-ZIP MIAMI FL 33138

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Steven J. Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven J. Johnson

1/16/95

305-751-7059

Date

Daytime Phone #

CR2E034 (12/95)