

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
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90058 047 ***150.00

0302247

DOCUMENT # 690223

1. Corporation Name
EDWIN KLETZEL, P.A.

Principal Place of Business
6596 RACQUET CLUB DRIVE
LAUDERHILL FL 33319-1807

Mailing Address
6596 RACQUET CLUB DRIVE
LAUDERHILL FL 33319-1807

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/15/1981

4. FEI Number

59-2093889

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 10790 N.W. 14 STREET

Suite, Apt. #, etc.

22 #185

City & State

23 PLANTATION, FL

Zip

24 33322

Country

25 US

2a. Mailing Address

26 10790 N.W. 14 STREET

Suite, Apt. #, etc.

27 #185

City & State

28 PLANTATION, FL

Zip

29 33322

Country

30 US

9. Name and Address of Current Registered Agent

KLETZEL, EDWIN
6596 RACQUET CLUB DRIVE
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent

81 Name

KLETZEL, EDWIN

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

10790 N.W. 14 STREET

83

#185

84 City

PLANTATION

FL

85 Zip Code

33322

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 agent 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

EDWIN KLETZEL

DATE

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME KLETZEL, EDWIN
STREET ADDRESS 6596 RACQUET CLUB DRIVE
CITY-ST-ZIP LAUD FL 07

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition

1.2 NAME KLETZEL, EDWIN
1.3 STREET ADDRESS 10790 N.W. 14 STREET #185
1.4 CITY-ST-ZIP PLANTATION, FL 33322

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 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:

EDWIN KLETZEL

Date

1/15/99

Daytime Phone #

954-915-0704

CR2E034 (11/98)