

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F79790** (4)

1. Corporation Name

LAW OFFICES OF GARRY J. ALHALEL, P.A.



Principal Place of Business

**% GARRY J ALHALEL
25 SE 2ND AVENUE
MIAMI FL 33131**

Mailing Address

**% GARRY J ALHALEL
25 SE 2ND AVENUE
MIAMI FL 33131**

3. Date Incorporated or Qualified
05/11/1982

3a. Date of Last Report
01/25/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

Country

29

Zip

Country

4. FEI Number
59-2195020

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALHALEL, GARRY J
25 SE 2ND AVENUE
MIAMI FL 33131**

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 (6)(2) and 607.15(8), 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 607.05(6), Florida Statutes.

SIGNATURE

Signature typed or printed below of the registered agent, if the registered agent is not the corporation.

Signature typed or printed below of the registered agent, if the registered agent is not the corporation.

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

11a. TITLE

**DP
ALHALEL, GARRY J
25 SE 2ND AVENUE
MIAMI, FL 00000**

☐ DELETE

11b. NAME

11c. STREET ADDRESS

11d. CITY-STATE-ZIP

12a. TITLE

12b. NAME

12c. STREET ADDRESS

12d. CITY-STATE-ZIP

13a. TITLE

13b. NAME

13c. STREET ADDRESS

13d. CITY-STATE-ZIP

14a. TITLE

14b. NAME

14c. STREET ADDRESS

14d. CITY-STATE-ZIP

15a. TITLE

15b. NAME

15c. STREET ADDRESS

15d. CITY-STATE-ZIP

16a. TITLE

16b. NAME

16c. STREET ADDRESS

16d. CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

☐ Change ☐ Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-STATE-ZIP

13.5 TITLE

☐ Change ☐ Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-STATE-ZIP

13.9 TITLE

☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

13.13 TITLE

☐ Change ☐ Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-STATE-ZIP

13.17 TITLE

☐ Change ☐ Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-STATE-ZIP

13.21 TITLE

☐ Change ☐ Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-STATE-ZIP

13.25 TITLE

☐ Change ☐ Addition

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 included 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 or Block 14, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARRY J. ALHALEL

1/17/96

(305) 374-8197

CR2E034 (12/95)