Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90053 028 ***150.00

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**

DOCUMENT # F9600005748

1. Corporation DANIEL	P. COPE & ASSOCIATES, II	NC.					
Principal Place of Business Mailing Address							
1980 NW 25TH STREET 1980 NW 25TH STREET							
BOCA RATON FL 33431-4018 BOCA RATON FL 33431-4018					70 VOT WOTT IN THE ODACE		
						DO NOT WRITE IN THIS S	SPACE
						3. Date Incorporated or Qualifed 11/04/1996	
2. Principal Pl	ace of Business	2a. Mailing	Address			4. FEI Number	Applied For
21		26		_		65-0693523	Not Applicable
Suite, Apt.	#, etc.	Suite, Ap	pt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22	<u>ہے جاند</u> مش <u>نحی ہیں۔</u> ب <u>راح بدل</u> مشنحی ہیں۔		<u></u>	يندجد	مستعدونه		Fee-Required
City & State	a ,	City & S	State			6. Election Campaign Financing	\$5.00 May Be
23 .	<u> </u>	28			 	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	[Country		8. This corporation owes the current year Inta	ngible ∐Yes.
24	25	29	30	<u>'l</u>		Personal Property Tax. 10. Name and Address of New Registered A	
	9. Name and Address of Current	r Kedisteren Añ	ent	81	Name	IV. Harre and Address of Non-Address .	
COP	E, DANIEL P						
1980 NW 25TH ST				Street Addi	ress (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33431				83			
				84	City	FL	85 Zip Code
-46 05-	to the provisions of Sections 607.050; egistered agent, or both, in the State of m familiar with, and accept the obligat	へた こういかけっこうしょうしょ	ananga was auin	orized by	TRE COMPORATION	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	thanging its registered tment as registered
SIGNATURE	DANIEC P. COPE Signature, typed or printed name of registered agen	. PRESI	DENT	gistered Age	and the	Milegae April DATE	2,1889
12.	OFFICERS AN		·	13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PCD		☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	COPE, DANIEL P			1.2 NAME			
STREET ADDRESS	1980 NW 25TH STREET			1.3 STREET	T ADDRESS		
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-S	T-ZiP		
TITLE	·		☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME				2.2 NAME			
STREET ADDRESS			-	2.3 STREE	TADDRESS		_
CITY-ST-ZIP				-2.4 CITY-5	ST-ZIP	the second secon	
TITLE	•		☐ DELETE	3.1 TITLE		•	Change Addition
NAME	,			3.2 NAME			
STREET ADDRESS				3.3 STREE	TADDRESS		
CITY-ST-ZIP				3.4. CITY- 5	ST-ZIP		
TITLE	· ;		☐ DELETE	4.1 TITLE			Change Addition
NAME				4. 2 NAME			ţ
STREET ADORESS				4.3 STREE	TADDRESS		İ
CITY-ST-ZIP			□ as: ===	4.4 CITY-S	T-ZIP		☐ Change ☐ Addition
TITLE			☐ DELETÉ	5.1 TITLE	1	•	☐ Change ☐ Addition
NAME				5.2 NAME	- LDDD500		
STREET ADDRESS				8	T ADDRESS		
CITY-ST-ZIP			DELETE	5.4 CITY-S 6.1 TITLE	I-ZIP		☐ Change ☐ Addition
mn.e							

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 or an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

OREQLARES DENT