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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **G17011**

1. Corporation Name

DAVID J. ROSENTHAL, CPA, P.A.

Mailing Address Principal Place of Business 1121 NW 106 AVE 1121 NW 106 AVE PLANTATION FL 33322 PLANTATION FL 33322 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/01/1983 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-2242377 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 6. - Election Campaign Financing \$5.00:May.Be: City & State City & State Added to Fees Trust Fund Contribution 28 23 Zip Country 8. This corporation owes the current year Intangible Country Zip Personal Property Tax. 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent ROSENTAL, DAVID J., CPA Street Address (P.O. Box Number is Not Acceptable) 1121 NW 106 AVE. PLANTATION FL 33322 83 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 CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 11 TITLE 0. 241 7 TITLE 1.2 NAME ROSENTHAL, DAVID J., CPA NAME 1.3 STREET ADDRESS 1121 NW 106 AVE. STREET ADDRESS **PLANTATION FL 33322** 1,4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 2.1 TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 3.1 TITLE TITI F 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change [11] Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 6.1 TITLE □ DELETE TITLE

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.

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

DAVID J. ROSENTA

FILED

Feb 10, 1999 8:00am

Secretary of State

02-10-1999 90066 016 ***150.00