

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # H13018

(7)

1. Corporation Name

LAW OFFICES OF RICHARD C. POLLOCK, P.A.

95 JAN 13 AM 9:53

Principal Place of Business

% RICHARD C. POLLOCK
7700 N. KENDALL DRIVE, SUITE #515
MIAMI FL 33156

Mailing Address

% RICHARD C. POLLOCK
7700 N. KENDALL DRIVE, SUITE #515
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/18/1984

3a. Date of Last Report

01/20/1994

4. FEI Number

59-2431800

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

2. Principal Place of Business

21 Suite, Apt. #, etc

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

29 Country

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

9. Name and Address of Current Registered Agent

POLLOCK, RICHARD C.
7700 N. KENDALL DRIVE
SUITE # 515
MIAMI FL 33156

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)

(Signature) (Typed or printed name of registered agent and title if applicable)

(Date)

12. OFFICERS AND DIRECTORS

TITLE PD
NAME POLLOCK, RICHARD C.
STREET ADDRESS 7700 N. KENDALL DR. #5
CITY, ST, ZIP MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is substantially true and correct and that the information stated in Section 110.02(6)(b), Florida Statutes, that I certify that the information indicated on this annual report or supplemental annual report is true and complete and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this corporation or the person or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or 13 and has not changed, or on an attachment with an address.

SIGNATURE:

RICHARD C. POLLOCK

(Signature) AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/95

305-518-6666

(Date)

(Telephone Number)