

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jun 17, 1999 8:00 am  
Secretary of State

06-17-1999 90002 031 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT #

H61081

1. Corporation Name

JEFFREY N. HALLER, CONTINGENT PUBLIC ACCOUNTANT  
P.A.

Principal Place of Business

Mailing Address

C/O JEFFREY N. HALLER  
820 W. 43 CT.  
MIAMI BEACH, FL 33140

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5-31-85

2. Principal Place of Business

2a. Mailing Address

21/ 820 W. 43 CT

26/ 820 W. 43 CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-2536107

Applied For

Not Applicable

22

City & State  
MIAMI BEACH, FLORIDA

27  
City & State  
MIAMI BEACH, FL

23  
Zip 33140 Country USA

28  
Zip 33140 Country USA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HALLER, JEFFREY P.  
820 W. 43 CT.  
MIAMI BEACH, FL 33140

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 607.0502 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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D/P  
HALLER, JEFFREY N.  
820 W. 43 CT.  
MIAMI BEACH, FL  
P.O. Box 42357

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
Change Addition

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:

JEFFREY N. HALLER

6-9-99

(305) 532-1040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

**Jeffrey N. Haller, CPA, P.A.**

820 West 43<sup>rd</sup> Court  
P.O. Box 403554  
Miami Beach, Florida 33140

576943-90002-31

H61081

June 14, 1999

Annual Report Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

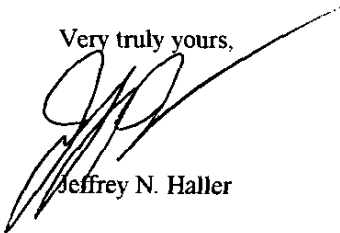
RE: Jeffrey N. Haller, Certified Public Accountant, P.A.  
F E I 59-2536107, #H61081

To whom it may concern,

Please accept this duplicate filing and payment of annual fees for the above referenced corporation. Pursuant to my call to your office, my annual report, submitted in April of 1999, was never received and logged in. I am therefore sending a duplicate with the original Fee amount due of \$150.00.

At the time of filing, I was hospitalized and my wife neglected to make a copy for my records. Kindly accept the enclosed.

Very truly yours,



Jeffrey N. Haller