

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # H84445 (6)

1. Corporation Name

GARY R. SIEGEL, P.A.



Principal Place of Business

Mailing Address

%SIEGEL, GARY R.  
~~2600 DOUGLAS RD., PH 2~~  
~~CORAL GABLES FL 33134~~  
US

%SIEGEL, GARY, R.  
~~2600 DOUGLAS RD., PH 2~~  
~~CORAL GABLES FL 33134~~  
US

3. Date Incorporated or Qualified  
10/29/1985

3a. Date of Last Report  
02/22/1995

2. Principal Place of Business

2a. Mailing Address

21 7700 N. Kendall Dr.

26 Same

4. FEI Number

59-2641020

Applied For

Not Applicable

22 Suite, Apt. #, etc.  
Suite 610

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23 City & State  
Miami, FL

City & State

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24 Zip Country  
33156 US

Zip Country

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

SIEGEL, GARY R.  
2600 DOUGLAS ROAD,  
PENTHOUSE 2  
CORAL GABLES FL 33134

81 Name

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

7700 N. Kendall Dr.  
Suite 610

84 City Miami

85 Zip Code 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

Gary R. Siegel

GARY R. SIEGEL

1/25/96

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FILE ☐ DELETE

1.1 TITLE ☒ Change ☐ Addition

NAME  
SIEGEL, GARY R.  
STREET ADDRESS  
2600 DOUGLAS ROAD, PH 2  
CITY-ST-ZIP  
CORAL GABLES FL

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
7700 N. Kendall Dr Suite 610  
Miami, FL 33156

FILE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME

2.2 NAME

STREET ADDRESS

2.3 STREET ADDRESS

CITY-ST-ZIP

2.4 CITY-ST-ZIP

FILE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY-ST-ZIP

3.4 CITY-ST-ZIP

FILE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY-ST-ZIP

4.4 CITY-ST-ZIP

FILE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-ST-ZIP

5.4 CITY-ST-ZIP

FILE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

FILE ☐ DELETE

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 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.

SIGNATURE:

GARY R. SIEGEL Pres. GARY R. SIEGEL 1/25/96 305-279-9696

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (12/95)