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PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H93065

DIANA B. DENHOLM, PH.D., P.A.

FILED
Jan 22, 1999 8:00am
Secretary of State

01-22-1999 90051 034 ***150.00



1017 N. FLACIED DD	•	dress			1			
1617 N FLAGLER DR								
10A	104							
WEST PALM BEACH FL 33407					DO NOT WRITE IN THIS SPACE			
US ·	US				3. Date Incorporated or Qua	alifed		
					01/07/1986			
2. Principal Place of Business	2a. Mailing	Address			4. FEI Number		A	pplied For
21	26				59-2665517		N	ot Applicable
Suite, Apt. #, etc.	Suite, A	pt. #, etc.			5. Certifcate of Status Desir	ed 🗆		Additional
22	27				3. Octained of Olding Desir		Fee R	equired
City & State * 15 5000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	City & S	State			6. Election Campaign Finan	cing []	\$5.00	May Be
23 + ³ 7, 4 + 1, 1, 2, 3, 1, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	28				Trust Fund Contribution		Added	to Fees
Zip 👸 🛴 3 Country	Zip	Zip Country			8. This corporation owes the	current year Inte	angible	
24 25	29	30	5		Personal Property Tax.		Yes	□No
9: Name and Address of Current	Registered Ag	ent			10. Name and Address of N	lew Registered	Agent	
			81	Name				
DENHOLM, DIANA			82	C44 A 4 4	(DO B. N. L			
1617 N FLAGLER DR			82	Street Add	Iress (P.O. Box Number is Not Ac	ceptable)		J
. 10A			83			1 2 4 4 3 4	7	
3 W. PALM BCH FL 33407				<u> </u>	កំសម ក្នុំ ស្រែបើកាន		<u> </u>	2.1 (2.1
			84	City			85 Zip	Code
100000000000000000000000000000000000000	1 007 (500					FL		
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of	and 607.1508, f Florida. Such (riorida Statutes, change was auth	tne above orized by	e-named corporati	poration submits this statement to ion's board of directors. I hereby a	r the purpose of accept the appoir	cnanging its ntment as re	s registerea egistered
office or registered agent, or both, in the State of West agent: I am familiar with, and accept the obligation	ons of, Section (607.0505, Florida	Statutes			, ,		
SIGNATURE	• .* 							
Signature, typed or printed name of registered agent a		(NOTE: Reg	— <u> </u>	nt signature require	ed when reinstating)	DATE		
12. OFFICERS AND			13.		ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE PST		☐ DELETE	1.1 TITLE				Change	☐ Addition
NAME DENHOLM, DIANA B.					and the second s			
			1.2 NAME					
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		2		1				
STREET ADDRESS 1617 NW FLAGLER DR., #10A		□ Delete	1.3 STREET	1			☐ Change	Addition
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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 orygin attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)