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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # J12232 1. Corporation Name

DANIEL AMEY, P.A.

Apr 06, 1999 8:00 am Secretary of State
Secretary of State
04-06-1999 90063 012 ***150.00

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Principal Place of Business Mailing Address							.,, .,,, ,,,,,		
% DANIEL AMEY % DANIEL AMEY									
3641 W. 36TH S		3641 W. 36TH ST.	RIVIERA BEACH FL 33404-2238			DO NOT MIDIT		DACE	
RIVIERA BEACH	FL 33404-2238	RIVIERA BEACH FL 33404-223 US				DO NOT WRITE IN THIS SPACE			
US						<ol> <li>Date Incorporated or Qualifed 04/28/1986</li> </ol>			
2. Principal Pl	lace of Business	2a. Mailing Address		•		4. FEI Number			Applied For
21		26	26			59-2682966			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22	- · #	27				5. Certificate of Status Desired.	<u> </u>	Fee I	Required
City & State	В	City & State				6. Election Campaign Financing	Ώ		<b>0</b> May Be
23		28				Trust Fund Contribution		Adde	d to Fees
Zip	Country	Zip	Country	/		<ol><li>This corporation owes the current</li></ol>			<b>.</b>
24	25	29 30	)			Personal Property Tax.		☐ Yes	No
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New F	Registered A	gent	
	V BANKE		81	Nan	ne				
	Y, DANIEL		82	Stre	et Addres	ss (P.O. Box Number is Not Accepta	able)		
	W. 36TH ST.								
RIVIE	ERA BEACH FL 33404	r	83	1		<del></del>			
			84	City			FL	85 Zi	p Code
	to the provisions of Sections 607.050	th and 607 1509 Elorida Statutan	the abov	o nam	ed corpor	ation submits this statement for the	numose of o	hanging	its registered
office or re	egistered agent or both in the State.	of Florida. Such change was auth	iorized by	the co	orporation	's board of directors. I hereby accer	ot the appoin	tment as	registered
agent. 1 a	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	a Statutes	S.					
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: Re	gistered Age	nt signatu	re required w	vhen reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13,			ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	D	☐ DELETE	1.1 TITLE					☐ Chang	e 🔲 Addition
NAME	AMEY, DANIEL		1.2 NAME						
STREET ADDRESS	3641 W. 36TH ST.		1.3 STREE	T ADDRE	ss				ļ
CITY-ST-ZIP	RIVIERA BEACH FL		1.4 CITY-5	ST-ZIP					j
TITLE		☐ DELETE	2.1 TITLE					Chang	e 🔲 Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREE	TADORE	ss				
CITY-ST-ZIP		مست در ه	2.4 CITY-	ST-ZIP					
TITLE	-	☐ DELETE	3.1 TITLE		<u> </u>		•, •	Chang	e Addition
NAME			3.2 NAME						
STREET ADDRESS			3 3 STREE		ss				
			3.4. CITY-						
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	· · · ΔII	-			☐ Chang	e Addition
NAME			4. 2 NAME						
			4.3 STREE		ss				
STREET ADDRESS			4.4 CITY-S		~~				
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	√1-4IF	+			Chang	ge Addition
TITLE		to becare	5.2 NAME						
NAME		v 5	5.3 STREE		ss				j
STREET ADDRESS			5.4 CITY-5						
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	LIF	+			Chang	e
TITLE			6.2 NAME					المامات رے	
NAME									
STREET ADDRESS	भित्रहरूका । भित्रहरूका अस्ति ।		6.3 STREE		:00				İ
CITY-ST-ZIP.	The second secon		6.4 CITY-	ST-ZIP		140 07/2\(\text{i}\) Florido Statuto			

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 or fair attachment with an address, with all other like empowered.

SIGNATURE: