

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # J26034

1. Entity Name
PEGGY CAPLAN, P.A.



Principal Place of Business

2701 N OCEAN DRIVE
C/O TRIO
RIVIERA BEACH, FL 33404 US

Mailing Address

2701 N OCEAN DRIVE
C/O TRIO
RIVIERA BEACH, FL 33404 US

FILED
Sep 02, 2008 08:00 AM
Secretary of State



07192008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2702729

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KRAMER, SCOTT
840 U.S. HIGHWAY ONE
SUITE 220
NORTH PALM BEACH, FL 33408

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Peggy Caplan Peggy Caplan

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

000000958741
09/02/08-00994-017 150.00
8/26/08
DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST CAPLAN, PEGGY 2701 N OCEAN DRIVE RIVIERA BEACH, FL 33404
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Peggy Caplan Peggy Caplan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/08 561 371 1952

Date Daytime Phone #