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## 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 # J52297

1. Corporation Name

THE LAW OFFICES OF JEFFREY EHRLICH, P.A.

Principal Place of Business Mailing Address							T 1005110 0101 01110 31610 11910 19111 1001 01011 01011 01011 01011 01011	019111961	
333 NORTH NEW RIVER DR		333 NORT	333 NORTH NEW RIVER DR						
2000		2000 ET LAUDE					DO NOT WRITE IN THIS SPACE		
FT LAUDERDALI US	E FL 33301		FT LAUDERDALE FL 33301 US				3. Date incorporated or Qualifed		
00						1	01/16/1987		
2. Principal Pl	ace of Business	2a. Mailin	g Address					ed For	
21		26	26				<b>59-2794439</b> Not A	pplicable	
Suite, Apt. #, etc.		Suite,	Suite, Apt. #, etc.				\$8.75 Add		
22		27					rea Kequ		
City & State		City 8	City & State				6. Election Campaign Financing \$5.00 Ma		
23		28					Trust Fund Contribution Added to F	ees	
—₁ Zip			Zip Cou		,		8. This corporation owes the current year Intangible	urrent year intangible	
24	25 25 Com	29	30	<u>)                                     </u>			Personal Property Tax. LYes L  10. Name and Address of New Registered Agent		
	9. Name and Address of Cur	rent Registered /	- Agent	81	N	Name	W. Haine and Address of New Registered Agent		
EHRILICH, JEFFREY									
150 SE 12 STREET SUITE 401				82 Street Add			ss (P.O. Box Number is Not Acceptable)		
	AUDERDALE FL 33316				-			- "	
					<u> </u>				
				84	C	City	FL 85 Zip Coo	ie	
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.								jistered tered	
SIGNATURE	Signature, typed or printed name of registered	soont and title if annicat	le (NOTE: Pe	mietorod Anor	nt sin	gnature required wi	when reinstation) OATE	— İ	
12.		AND DIRECTOR	· · · · · · · · · · · · · · · · · · ·	13.	it ung	gribtare requires in	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	S IN 12	
TITLE			1.1 TITLE			☐ Change	Addition		
NAME	EHRLICH, JEFFREY			1.2 NAME				Ì	
			1.3 STREET	TADI	DRESS				
CITY-ST-ZIP	FT LAUDERDALE FL			1.4 CITY-S	T-ZH	1P			
TITLE			☐ DELETE	2.1 TITLE			Change	Addition	
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET	TADI	DORESS			
CITY-ST-ZIP	<u> </u>		_	2. 4 CITY-S	ST- ZI	IP I		T Addist-	
TITLE			☐ DELETE	3.1 TITLE			Change	Addition	
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	T ADI	DRESS			
CITY-ST-ZIP			DELETE	3.4. CITY-S	ST-ZI	IP IP	Change	Addition	
TITLE			☐ DELETÉ	4.1 TITLE		İ	Change		
NAME			4. 2 NAME 4.3 STREET ADDRESS						
STREET ADDRESS	•					1			
CITY-ST-ZIP			☐ DELETE	4.4 CITY-S	1-ZII	IP	Change	Addition	
TITLE				5.7 TILE 5.2 NAME					
NAME STREET ADDRESS				5.3 STREET	TAD	DORESS			
CITY-ST-ZIP				5.4 CITY-S					
TITLE			☐ DELETE	6.1 TITLE			Change	Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	6.3 STREET ADDRESS				
							,		

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:** 

NAME OF SIGNING OFFICER OR DIRECTOR