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

PROFIT CORPORATION ANNUAL REPORT



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

1996

J53682

DOCUMENT #
1. Corporation Name

FRANK, SCHMITT & FRANK, P.A.

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Principal Place of Business Mailing Address											
1666 KENNE 705 CAPITAL	705 CA	1866 KENNEDY CAUSEWAY 705 CAPITAL BANK BLDG. NORTH BAY VILLAGE FL 33141-4196 US									
NORTH BAY VILLAGE FL 33141-196 US							3. Date incorporated or Qualified 01/27/1987	3a. Date of Last Report 05/01/1995			
2. Principal Place of Business 2a. 21 26 Suite, Apt #, etc. 22 27			. Mailing Address Suite, Apt. #, etc.				4. FET Number Applied Fo 59-0686994 Not Applied Fo				
							5. Certificate of Status Desired Security Securi				
City & State			City & State			··	6. Election Campaign Financing 1 rust Fund Contribution S5.00 May Be Added to Fees				
Zφ Country 24 25 29			Zip Country 30				 This corporation has liability for intangible tax under s 199.032, Ftorida Statutes ☐ Yes ☑ No 				
	9. Name and Address of Curr	ent Registered A	gent		·r :		10. Name and Address of New F	legistered A	gent		
				81	'	Name					
#705 C	, MICHAEL A. Capital Bank Bldg.			82	1 7	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)			
	ENNEDY CAUSEWAY BAY VILLAGE FL 33141			83	$ floor_{-}$				10-1 7	- Codo	
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or registere familiar wit	ed agent, or both, in the Stale of Flont, and accept the obligations of, Se Signature, typed or printed name of registered a	orida. Such change oction 607.0505, Fl	e was authoriz orida Statutes	rea by the corp	por	ation s boai	ation submits this statement for the purid of directors. I hereby accept the app I when the leaving: ADDITIONS/CHANGES TO OFF	DATE	·		
TITLE	DP		DELETE	1. 1 TIFLE					Charige	Addition	
NAME	Frank, Robert R.			1.2 NAME							
STREET ADDRESS	1666 KENNEDY CAUSEV	'AY		1.3 STREE	1 A1	DDRESS					
CITY-ST-ZIP	N BAY VILLAGE FL			14 CiTY-	ŞI.	7.P					
TITLE] DELETE	2 1 1111 F] Change	Addition	
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NAME				6.2 NAME							
STREFT ADDRESS				63 STREE	ET A	DDRESS					
CITV_ST_7IP				6.4 CITY-	- 51 -	ZIP					
14 Ldo hereb	y certify that the information supplied the information indicated on this a	ed with this filing is	voluntarily fur	nished and do nual report is t	es rue	not qualify that and accura	for the exemption stated in Section 119 ate and that my signature shall have the	9.07(3)(k), Flo e same lega!	nda Statu effect as	леs. I further if made under	

oath; that I am an officer or display for 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:

(Robert R. Frank)

3/22/96.....

305-868-4711 Daytonic Pricine #