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Apr 01, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J55483

1. Corporation Name
ROBERT A. HENRY, P.A., CERTIFIED PUBLIC ACCOUNTANT

Principal Place of Business 7501 W OAKLAND PARK BLVD SUITE 306 LAUDERHILL FL 33319 US	Mailing Address 7501 W OAKLAND PARK BLVD SUITE 306 LAUDERHILL FL 33319 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8360 W. Oakland Park Blvd.	2a. Mailing Address 26 8360 W. Oakland Park Blvd.	4. FEI Number 59-2766183	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc. 22 Suite 301	Suite, Apt. #, etc. 27 Suite 301	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State 23 Sunrise, FL	City & State 28 Sunrise, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 24 33351	Country 25 USA	Zip 29 33351	Country 30 USA
9. Name and Address of Current Registered Agent		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

HENRY, ROBERT A.
5925 NW 99 WAY
SUITE 201
PARKLAND FL 33076

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 officer 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	HENRY, ROBERT A.
STREET ADDRESS	5925 NW 99 WAY
CITY-ST-ZIP	PARKLAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

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: Robert A. Henry DATE: 3/29/99 DAYTIME PHONE: 954 748 3699

CR2E034 (11/98)