

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 6/30/94: \$228 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # K08604

(6)

1. Corporation Name

ANDREW E. FARBER, P.A.

Principal Place of Business

9033 W. GLADES RD.
STE. #A
BOCA RATON FL 33434

Mailing Address

9033 W. GLADES RD.
STE. #A
BOCA RATON FL 33434

FILED
95 JUL 11 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/23/1987

3a. Date of Last Report

07/14/1994

4. FEI Number

65-0031817

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 23123 St. Rd. 7

Suite, Apt. #, etc.

22 Suite 350-B

City & State

23 Boca Raton FL

Zip

24 33428

County

25 USA

2a. Mailing Address

26 23123 St. Rd. 7

Suite, Apt. #, etc.

27 Suite 350-B

City & State

28 Boca Raton FL

Zip

29 33428

Country

30 USA

9. Name and Address of Current Registered Agent

FARBER, ANDREW E.
9033 W. GLADES RD.
STE. #A
BOCA RATON FL 33434

10. Name and Address of New Registered Agent

81 Name

Andrew E. Farber

82 Street Address (P.O. Box Number is Not Acceptable)

23123 St. Rd. 7 Suite 350-B

83

84 City

Boca Raton

FL

85 Zip Code

33428

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.

SIGNATURE

Signature, typed or printed name of registered agent (and the if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PSTD
FARBER, ANDREW E.
9033 W. GLADES RD., #A
BOCA RATON FL 33434

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

Change ☒ Addition ☐
23123 St. Rd. 7 Suite 350-B
Boca Raton FL 33428

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Andrew Farber / President

7/6/95

407-451-1969