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

DOCUI	MENT # K39033	3					
1. Corporation Name STEVEN W. PRICE AND ASSOCIATES, INC.							
Principal Place	e of Business	Mailing Address	****				Bil VIVII IVTI
6464 NW 5 WA		6464 NW 5 WAY					,
FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309					DO NOT WRITE IN TH	IIS SPACE	
US		U\$			3. Date Incorporated or Qualifed		
	<u> </u>	 ,			10/17/1988		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Apı	plied For
· 		26			65-0093532	Not	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	1	
27					3. Certificate of Clauds Desired	Fee Re	quired
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·	
Zip	Zip Country Zip		Country 30		8. This corporation owes the current year Intangible Personal Property Tax. ☑ Yes □ No		
24	9. Name and Address of Curre		30		10. Name and Address of New Register		
	3. Italie and Address of Carre		8	1 Name			
PRIC	CE, STEVEN W.		L	2) Ctat Add	Image /D.O. Boy Number is Not Acceptable)		
6464 NW 5 WAY FT LAUDERDALE FL 33309			8	2 Street Add	reet Address (P.O. Box Number is Not Acceptable)		
			8	3			
			-	A C:b:		85 Zip C	`ode
				4 City		L	
affica as -	to the provisions of Sections 607.05 registered agent, or both, in the State familiar with, and accept the oblig	a of Florida. Such change Was al	ithonzed n	v me comorau	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its pointment as rec	registered jistered
	in familial with, and accept the oblig	ations of, addition out to out the					
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE:	Registered Ag	jent signature require			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	PRICE, STEVEN W.		1.2 NAM	1		•	
STREET ADDRESS			1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP			Change	Addition
TITLE		☐ DELETE	2.1 TITLE				
NAME			2.2 NAMI				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		☐ DELETE	2. 4 CITY 3.1 TITLE			☐ Change	Addition
TITLE			3.2 NAMI			_ •	_
NAME				ET ADDRESS			
STREET ADDRESS CITY- ST-ZIP			3.4. CITY	l l			
TITLE		DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAM	E	•		
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			52 NAM	∃			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAM				
STREET ADDRESS	1			ET ADDRESS			
	į.		64 CITY	- ST. 710			J

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: