

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90292 026 ***750.00

DOCUMENT # K53931

1. Corporation Name

SMITH, DEMAHY, DRAKE, COZAD & CABEZA, P.A.

Principal Place of Business

% KENNETH SMITH
141 N.E. 3RD AVE. PH
MIAMI FL 33132

Mailing Address

% KENNETH SMITH
141 N.E. 3RD AVE. PH
MIAMI FL 33132

2. Principal Place of Business

21 4865 SW 58 Ave

Suite, Apt. #, etc.

22 City & State
23 Fort Lauderdale, FL

24 Zip 33314 25 Country USA

2a. Mailing Address

26 4865 SW 58 Ave

Suite, Apt. #, etc.

27 City & State
28 Fort Lauderdale, FL

29 Zip 33314 30 Country USA

3. Date Incorporated or Qualified

12/28/1988

4. FEI Number

65-0096776

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

SMITH, KENNETH
141 N.E. 3RD AVE
PH
MIAMI FL 33132

10. Name and Address of New Registered Agent

81 Name

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

83 4865 SW 58 Avenue

84 City Fort Lauderdale

FL

85 Zip Code

33314

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME SMITH, KENNETH
STREET ADDRESS 141 N.E. 3RD AVE
CITY-ST-ZIP MIAMI FL

TITLE DVP ☐ DELETE

NAME DEMAHY, PETE L.
STREET ADDRESS 141 N.E. 3RD AVENUE
CITY-ST-ZIP MIAMI FL

TITLE DST ☐ DELETE

NAME DRAKE, KENNETH R.
STREET ADDRESS 141 N.E. 3RD AVENUE
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 4865 SW 58 Avenue
1.4 CITY-ST-ZIP Fort Lauderdale, FL 33314

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 8325 NW 161 Terrace
2.4 CITY-ST-ZIP Miami, FL 33016

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 15111 Netherth Place
3.4 CITY-ST-ZIP Miami Lakes, FL 33016

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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:

Kenneth Smith

Date

Daytime Phone #

4/21/99

951-791-4605

CR2E034 (11/98)