FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **K64697** **(1)**

1. Corporation Name

JUDITH R. WAGNER C.P.A. P.A.

Principal Place of Business

% JUDITH R. WAGNER
162 N.W. 98TH LANE
CORAL SPRINGS FL 33071

Mailing Address

% JUDITH R. WAGNER
162 N.W. 98TH LANE
CORAL SPRINGS FL 33071

3. Date Incorporated or Qualified: **02/03/1989**

3a. Date of Last Report: **04/11/1995**

4. FEI Number: **65-0095447** ☐ Applied For ☐ Not Applicable

5. Good Standing of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation is subject to tax liability for intangible tax under s. 199.032, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 County 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip 29 County 30

9. Name and Address of Current Registered Agent

WAGNER, JUDITH R.
162 NW 98 LANE
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502, Florida Statutes, the above-named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The undersigned, by the corporation's board of directors, hereby accepts the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WAGNER, JUDITH R.
STREET ADDRESS 162 NW 98 LANE
CITY-ST-ZIP CORAL SPRINGS FL
☐ DELETE

TITLE
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CITY-ST-ZIP
☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE ☐ Change ☐ Addition
1 NAME
1 STREET ADDRESS
1 CITY-ST-ZIP

2 TITLE ☐ Change ☐ Addition
2 NAME
2 STREET ADDRESS
2 CITY-ST-ZIP

3 TITLE ☐ Change ☐ Addition
3 NAME
3 STREET ADDRESS
3 CITY-ST-ZIP

4 TITLE ☐ Change ☐ Addition
4 NAME
4 STREET ADDRESS
4 CITY-ST-ZIP

5 TITLE ☐ Change ☐ Addition
5 NAME
5 STREET ADDRESS
5 CITY-ST-ZIP

6 TITLE ☐ Change ☐ Addition
6 NAME
6 STREET ADDRESS
6 CITY-ST-ZIP

CR2E034 (12/95)

14. I declare that the information indicated on this report is true and accurate and that my electronic 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 added above or on an attachment with an address.

SIGNATURE: Judith R Wagner JUDITH R WAGNER 4/6/96 (954) 340-2802
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE