


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 29, 1999 8:00 am
Secretary of State

07-29-1999 90027 011 ***550.00

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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 # **K66823**

1. Corporation Name

FLORIDA AGENTS SOUTH, INC.

Principal Place of Business

3921 S.W. 47TH AVE
SUITE 1008
FT. LAUDERDALE FL 33314
US

Mailing Address

3921 S.W. 47TH AVE
SUITE 1008
FT. LAUDERDALE FL 33314
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/20/1989

4. FEI Number

65-0100266

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

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

☒ Yes

☐ No

2. Principal Place of Business

21 **3711 SW 47 AVE**

2a. Mailing Address

26 **3711 SW 47TH AVE**

Suite, Apt. #, etc.

22 **SUITE 203**

Suite, Apt. #, etc.

27 **SUITE 203**

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

HAURY, WILLIAM W., JR.
4875 N. FEDERAL HIGHWAY
10TH FLOOR
FORT LAUDERDALE FL 33308

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 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	V
NAME	PAEN, STEVEN	1.2 NAME	OCTAVIO DIAZ
STREET ADDRESS	3921 SW 47TH AVE SUITE 1008	1.3 STREET ADDRESS	3711 SW 47TH AVE SUITE 203
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33314
TITLE	ST	2.1 TITLE	P
NAME	O'CONNELL, JOSEPH	2.2 NAME	PAEN STEVEN
STREET ADDRESS	3921 SW 47TH AVE SUITE 1008	2.3 STREET ADDRESS	3711 SW 47TH AVE SUITE 203
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	ST
NAME	FRANK VALDES	3.2 NAME	O'CONNELL
STREET ADDRESS	3921 SW 47TH AVE SUITE 1008	3.3 STREET ADDRESS	3711 SW 47TH AVE SUITE 203
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 from an attachment with an address.

SIGNATURE:

JOSEPH O'CONNELL 7/22/99 954321/1002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)