FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

DOCUMENT # L12260 RICHARD MARROTTE, O.D., P.A.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90016 041 ***150.00

| TO MOTOR IN THE CRACE | |
|-----------------------|--|

| C/O DEERCREEK PLAZA 119 N. POWERLINE RD DEERFIELD BCH FL 33442 US | | C/O DR RICHARD MARROTTE 119 N. POWERLINE RD. DEERFIELD BEACH FL 33442 US | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/22/1989 | | | | |
|--|---|---|--------------------|-------------|-------------------|--|----------------------------|--------------|--------------------------|----------------|
| 2 Principal Pl | ace of Business | 2a. Mailing Address | | | - | 4. FEI Number | | | TA | pplied For |
| 21 | | 26 | | | | 65-0143537 | | | | lot Applicable |
| Suite, Apt. i | Suite, Apt. #, etc. | e. Apt. #, etc. | | | _ | | | | \$8.75 Additional | |
| 22 27 | | | | | | 5. Certifcate of Status | Desired | | | Required |
| City & State City & State | | | | | | 6. Election Campaign Financing | | | \$5.00 May Be | |
| 23 | | 28 | | | - | Trust Fund Contrib | | | | to Fees |
| Zip · | Country | Zip | Countr | v —— | | 8. This corporation ov | | nt vear Inta | naible | |
| | 25 | 29 30 | 7 | • | | Personal Property | | | ∐Yes | ₽No |
| 24 | 9. Name and Address of Curren | 1,55 | ' | | | 10. Name and Addres | | egistered A | gent | |
| | J. Hamb and Address of Carre | | 8 | Nam | | | | | | |
| MAR | ROTTE, RICHARD | | | | | | | | | |
| | N. POWERLINE RD. | | 82 | 2 Stre | eet Address | Idress (P.O. Box Number is Not Acceptable) 3 N. HOWLV (In E. C.) | | | | \ \ |
| | RFIELD BEACH FL 33442 | | 8: | | 43 / | | | | | |
| ULLI | TIPLES BEAGIN E COTTE | | 0 | 1 | | | | | | |
| • • | 4 | | 84 | City | у | | | | 85 Zip | Code |
| | | | | | | | | <u> </u> | 1 | |
| 11. Pursuant t | to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with and accept the obliga | 2 and 607.1508, Florida Statutes, | the abo | /e-name | ned corporation's | tion submits this stater | ment for the pereby access | purpose of o | manging ii tment as i | s registered |
| agent. I ar | n familiar with and accept the obliga | of Section 607.0509, Florida | .Statute | s. | or poration a | a dodina ou amanatatat u | ,, | ./ | 1 | |
| | 16/1/ln 01 | | | | | | | 4/25/ | 199 | į |
| SIGNATURE | Signature, typid of printed name of registered age | and title if applicable. (NOTE: Re | gistered Age | ent signatu | ture required who | | | DATE | | |
| 12. | OFFICERS AN | DIRECTORS | 13. | | | ADDITIONS/CHANG | GES TO OFF | ICERS AN | | |
| TITLE | DP | ☐ DÉLETE | 1.1 TITLE | | | | | | Change | e ☐ Addition |
| NAME | MARROTTE, RICHARD | | 1.2 NAME | | | , , , | . مس | a. 0 | | İ |
| STREET ADDRESS | 119 N. POWERLINE RD. | • | 1.3 STREET ADDRESS | | ESS 1026 | ag Lexington xa Raton, | n Ests. | BIVY. | | |
| CITY-ST-ZIP | DEERFIELD BEACH FL | | 1.4 CITY- | ST-7IP | Bo | ra Raton | Fi. 3. | 3428 | | |
| TITLE | DELINICED BEACHTE | ☐ DELETE | 2.1 TITLE | | | | | | ☐ Change | Addition |
| i i | | | 2.2 NAME | | | | | | | } |
| NAME | _ | | | | | | | | | ! |
| STREET ADDRÉSS | | | 2.3 STREET ADDRESS | | E33 | • | | | | ł |
| CITY-ST-ZIP | | DELETE | 2.4 CITY- | | | · | | - | Change | Addition |
| TITLE | | DECETO | | | | | | | | |
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| NAME | | | 4. 2 NAM | = | | | | | | · |
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| CITY-ST-ZIP | | | 5.4 CITY- | ST-ZIP | | | | | | } |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | | | | Change | e ☐ Addition |
| NAME | | _ | 6.2 NAME | | | | | | | į |
| ' | | | | ET ADDRE | ESS | | | | | } |
| STREET ADDRESS | | | 6.4 CITY- | | | | | | | |
| C/TY-ST-ZIP 1 | | | 0.4 (-1111 | - 174F | | | | | | |

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 of 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 an other like empowered.

SIGNATURE: SIGNATURE AND TYPE OF