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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(3)

DOCUMENT # L20107

JEFFREY A. KERN, P.A.

Principal Place of Business

1997

Mailing Address

FILED Apr 16 1997 8:00am Secretary of State



11900 BISCAYNE BLVD SUITE 284 NORTH MIAMI FL 33181		11900 BISCAYNE BLVD., SUITE 264 North Miami Fl 33181-2726									
						3. Date Incorporated or Qualified 10/03/1989	3a. Dat			port	
	lace of Business	2a. Mailing Address			4, FEI Number			Applied For			
21		26				65-0186187				Applicable	
Suite, Apt. #, etc 22		Suite, Apt #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required				
City & State 23	2	City & State				Election Campaign Financing Trust Fund Contribution				May Be Fees	
Zip 24	Country 25	Zip 29	Coun'	try		8. This corporation has liability for intangible tax under s. 199.00 Florida Statutes Yes No				199.032,	
	g. Name and Address of Curi	ent Registered Agent			···	10. Name and Address of New Re	gistered A	gent			
KER	N, JEFFREY A.			31	Name						
11900 BISCAYNE BLVD BISCAYNE CENTER, SUITE 284				32	Street Addr	dress (P.O. Box Number is Not Acceptable)					
	TTH MIAMI FL 33181		8	33				•			
			8	34	City		FL	85	Zip C	ode	
office or n	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob	ite of Florida. Such change was a	authorized	bν	the corporat	poration submits this statement for the p dion's board of directors. I hereby accep	urpose of the appo	chang intme	ing its	registered egistered	
SIGNATURE	She area, hyperfor produce can eral registered	agent and title Lappiicable. (NOT	E: Registered A	Ager	n signature requir	red when reinstating)	DATE				
12.		AND DIRECTORS	13.	·-		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	TOR	S IN 12	
101_E	PD	☐ DELETE	1.1 TITL	E			1	Cha	nge	Addition	
NAM	KERN, JEFFREY A.		1.2 NAM	ΛE			1				
STREET ADDRESS	2000 TOWERSIDE TERR		13 STRI	EET	ADDRESS						
CHTY - \$1 - ZiP	MIAMI FL 33138		14 CITY		r-ZIP						
TITLE		DELETE	21 TITL	E			l	Cha	nge	Addition	
NAME			2.2 NAM	ΛE		•					
STREET ADDRESS					ADDRESS						
(ITY - \$1 - 7-9)		DELETE	2.4 Cfl*		T-ZIP	MARKET 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		Cha		Addition	
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NAME CONT. LANCES			B B		ADORESS						
STREET ADDRESS			3.3 STR								
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STREET ADDRESS					ADORESS						
COTY - ST - ZIP			4.4 CITY								
The		DELETE	5.1 TITL					Cha	inge .	Addition	
NAVE			5.2 NAM	A E						•	
STREET ADDRESS			5.3 STR	EET.	ADDRESS						
C(TY - S1 - Z)P			5.4 CITY	Y-S1	r-ZIP						
?lltf		DELETE	6.1 T(T).	.E				Cha	inge	Addition	
NAM.			6.2 NAM	ΛE							
STREET ADDRESS			6.3 STR	EET.	ADDRESS						

14. I do hereby certify that the information supplied with this filling 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 directly cattle 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 langed, or on an attachment with an address.

SIGNATURE: