

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L23221

(9)

name change filed
1-26-96

1. Corporation Name

~~PERRY, SHAPIRO, MILLER & JARKESEY, P.A.~~

PERRY, SHAPIRO, JARKESEY & ADAMS, P.A.

Principal Place of Business

1645 PALM BEACH LAKES BLVD
#600
WEST PALM BEACH FL 33401
US

Mailing Address

C/O ROBERT LEE SHAPIRO
1645 PALM BEACH LAKES BLVD #600
WEST PALM BEACH FL 33401
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

SHAPIRO, ROBERT LEE
UNITED NATIONAL BANK TOWER, SUITE 600
1645 PALM BEACH LAKES BLVD.
W. PALM BEACH FL 33401

3. Date incorporated or Qualified

10/17/1989

3a. Date of Last Report

01/18/1995

4. FEI Number

65-0151045

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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 of officer or director of corporation required when filing report

Signature of Registered Agent required when new filing

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

D
PERRY, F. MARTIN
1645 PALM BEACH LAKES BLVD #600
WEST PALM BEACH FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

D
SHAPIRO, ROBERT LEE
1646 PALM BEACH LAKES BLVD STE 600
WEST PALM BEACH FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

D
MILLER, JORDAN R.
1645 PALM BEACH LAKES BLVD STE 600
WEST PALM BEACH FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY - ST - ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/96

(407) 684-4500

CR2E034 (12/95)