

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**


FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # L42265**

1. Corporation Name

PETER R. MAYER, P.A.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 JUL 20 AM 8:54

Principal Place of Business  
4921 SOUTHFORK DRIVE, SUITE TWO  
LAKELAND FL 33813

Mailing Address  
4921 SOUTHFORK DRIVE, SUITE TWO  
LAKELAND FL 33813

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1990

4. FEI Number

65-0159606

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$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

Suite, Apt. #, etc.

32 - Suite 3

City &amp; State

23

Zip

33813-2078

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

32 - Suite 3

City &amp; State

28

Zip

33813-2078

Country

30

9. Name and Address of Current Registered Agent

MAYER, PETER R.  
4921 SOUTHFORK DRIVE, SUITE TWO  
LAKELAND FL 33813

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 Suite 3

84 City

FL 85 Zip Code  
33813-2078

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

CR2E034 (5/99)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/01/99 941-644-1749

**COPY FOR YOUR  
INFORMATION**

LAW OFFICES OF  
**Peter R. Mayer**  
A PROFESSIONAL ASSOCIATION

SOUTHFORK PROFESSIONAL CENTRE  
4921 SOUTHFORK DRIVE, SUITE 2  
LAKELAND, FLORIDA 33813

TELEPHONE  
(941) 644-1749  
(941) 644-2180

TELEFACSIMILE  
(941) 644-1749

**M E M O**

TO: Florida Department of State [Att'n.: Carol]

FROM: Peter R. Mayer, Esq.

DATE: 07/01/99

RE: Peter R. Mayer, P.A. 1999 Profit Corporation Annual Report Packet  
Kool Rag, Inc. 1999 Profit Corporation Annual Report Packet

☒ Pursuant to:

☒ telephone conversation of 07/01/99

☐ correspondence

☐ for your reference

Enclosed please find:

- ✓ 1999 Profit Corporation Annual Report for Peter R. Mayer, P.A.
- ✓ check # 4901 in the amount of \$150.00 which represents the Annual Report filing fee
- ✓ 1999 Profit Corporation Annual Report for Kool Rag, Inc.
- ✓ check # 2161 in the amount of \$150.00 which represents the Annual Report filing fee

NOTES:

Carol,

We didn't receive the *FIRST NOTICE* with respect to either corporation. The first Notice we received was today indicating it was the *SECOND NOTICE* provided us. We're advised we have a new address (see enclosed) -- perhaps this is the reason.

Please call if you have questions or require additional information.

Thanks!

/jmp

**COPY FOR YOUR  
INFORMATION**