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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 1. Corporation Name .45603

Principal Place of Business

SWEENY & ASSOCIATES, INC.

**FILED** Jan 22, 1999 8:00am **Secretary of State** 

01-22-1999 90002 037 \*\*\*150.00



2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Zip  Country  Zip  Country  25  29  30  Country  9. Name and Address of Current Registered Agent  SWEENY, H. W. ALLEN  SWEENY, H. W. ALLEN  COCONUT GROVE FL 33133  2a. Mailing Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Sip  Country  29  30  B1  Name  SWEENY, H. W. ALLEN  COCONUT GROVE FL 33133  83  City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the	rrent year	\$8.75 Fee R \$5.00 Added	Applied For Jot Applicate Additional Required May Be Into Fees	ble
Suite, Apt. #, etc.  22  City & State  City & State  Zip  Country  25  29  30  Country  9. Name and Address of Current Registered Agent  SWEENY, H. W. ALLEN  2000 SOUTH BAYSHORE DRIVE #50  COCONUT GROVE FL 33133  Suite, Apt. #, etc.  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation owes the current Personal Property Tax.  10. Name and Address of New Incompany Suited  81 Name  82 Street Address (P.O. Box Number is Not Accept.)  83 Street Address (P.O. Box Number is Not Accept.)	rrent year	\$8.75 Fee F \$5.00 Added Intangible  Yes	Additional Required  May Be I to Fees	
22 City & State City & State 23 City & State 25 Country 26 Country 27 Country 28 Country 29 30 South Bayshore Drive #50 COCONUT GROVE FL 33133 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes the cur Personal Property Tax. 9. Name and Address of Current Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Accept.) 83 Street Address (P.O. Box Number is Not Accept.) 84 City	rrent year	Fee F \$5.00 Added Intangible □ Yes '	May Be to Fees	
City & State  28  Zip  Country  29  30  1 9. Name and Address of Current Registered Agent  SWEENY, H. W. ALLEN  2000 SOUTH BAYSHORE DRIVE #50  COCONUT GROVE FL 33133  City & State  28  City & State  29  30  Country  30  81  Name  81  Name  82  Street Address (P.O. Box Number is Not Accept.)  83  84  City	rrent year	Added Intangible  Yes	to Fees	
Zip Country  2ip Country  2ip Country  8. This corporation owes the current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New 1  81 Name  82 Street Address (P.O. Box Number is Not Accept Registered Agent)  83 Street Address (P.O. Box Number is Not Accept Registered Agent)  84 City	Registere	☐ Yes '	ΣΖΝο.	
9. Name and Address of Current Registered Agent  SWEENY, H. W. ALLEN  2000 SOUTH BAYSHORE DRIVE #50 COCONUT GROVE FL 33133  83  84 City		ed Agent		
SWEENY, H. W. ALLEN 2000 SOUTH BAYSHORE DRIVE #50 COCONUT GROVE FL 33133  82 Street Address (P.O. Box Number is Not Accept. 83 84 City	table)			
2000 SOUTH BAYSHORE DRIVE #50 COCONUT GROVE FL 33133  82 Street Address (P.O. Box Number is Not Accept.  83 Street Address (P.O. Box Number is Not Accept.  84 City	table)			- 1
COCONUT GROVE FL 33133 83 84 City				
				4
11. Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes, the above-named corporation submits this statement for the		85 Zip	Code	- 10
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accessing 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)	e purpose opt the app	of changing it pointment as r	s registered egistered	d
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF		AND DIRECT	ORS IN 12	-18
TITLE P/S DELETE 1.1 TITLE	I I IOLIKO	☐ Change		
NAME SWEENY, H. W. ALLEN 12 NAME				
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CITY-ST-ZIP COCONUT GROVE FL 33133 · 1.4 CITY-ST-ZIP  TITLE VP □ DELETE 2.1 TITLE		☐ Change	Addi	ition
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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, or on an attachment with an address, with all other like empowered.