Aug 04, 1999 8:00 am Secretary of State

08-04-1999 90001 026 ***550.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L57807

1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

BENJAMIN & AARONSON, P.A.

Principal Place	of Business	Mailing Address			i innish as sull last in	98111 1881 \$1\$ 11	41411 E1811 E1811 E11		
ONE FINANCIAL PLAZA		ONE FINANCIAL PLAZA							
STE 1615		STE 1615			DO NOT WRITE IN THIS SPACE				
FT LAUDERDALE FL 33394 US		FT LAUDERDALE FL 33395 US			3. Date Incorporated or Qualifed				
03		00			03/16/1990			Ì	
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		App	lied For	
21		26			65-0189947		Not	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desire		- \$8.75.A		
22		27			5. Certificate of Status Desire	<u> </u>	Fee Req	uired	
City & State		City & State			6. Election Campaign Financ	ing 🖺	\$5.00 N		
23		28			Trust Fund Contribution		Added to	Fees	1
Zip	Country	Zip	_ Count	ry	8. This corporation owes the	current year li		⊒No (
24	25	29 3	10		Personal Property Tax. 10. Name and Address of No.	Ponietoro			
	9. Name and Address of Curren	t Registered Agent	- 8	11 Name	To. Name and Address of No	W Kegistere	a Agont		ı
AAR	ONSON, DANIEL R., ESQ.		<u> </u>						
	NE 3RD AVE., SUITE 850		٤	Street Addr	ess (P.O. Box Number is Not Acc	entable)	#1615	了	
	AUDERDALE FL 33301		8	3	TITICHS FE	<i>141</i> ,			
			5 0 mm r . v . 24	H CHY	LAWDERDAUS	5-4. F	L 85 33	374	
44-Pursuant	to the previsions of Sections 607.050	2 and 607.1508, Florida Statutes	North Tile		and the same that the same to be a second to the same	the market	of changing มีรา	egistered	
office or real	to the provisions of Sections 497.050; agistered agent, or both in the State in familiar with, and accept the obligat							Water Control	E CO
I SIGNATURE	Signature, typed or printed name of registered agen			gent signature require		DATE			6
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO	OFFICERS A			Š
TITLE	D DELETE		1.1 TITLE				☐ Change	☐ Addition	1
NAME	BENJAMIN, JAMES S., ESQ.		1.2 NAM	E					3
STREET ADDRESS	ONE FINANCIAL PLAZA, STE 1615		1.3 STR	EET ADDRESS					ŭ
CITY-ST-ZIP	FT LAUDERDALE FL 33394		1.4 CITY	-ST-ZIP				<u> </u>	Ì
TITLE	0	☐ DELETE		E			☐ Change	Addition !	
NAME	AARONSON, ESQ. D		2.2 NAM	E					1
STREET ADDRESS	ONE FINANCIAL PLAZA, STE 1	615	2.3 STR	EET ADDRESS					ļ
_CITY-ST-ZIP	_FT_LAUDERDALE_FL_33394			/-ST-ZIP			Change	Addition	1
TILE		☐ OELETE	3.1 7171	E			Change	Addition	
NAME			3.2 NAM	E					ĺ
STREET ADDRESS			3.3 STR	EET ADDRESS					ĺ
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP				A delikio o	{
TITLE		☐ DELETE	4.1 TITL	E			Change	☐ Addition	
NAME			4, 2 NAM	AE					1
STREET ADDRESS			4.3 STR	EET ADDRESS					ĺ
CITY-ST-ZIP				-ST-ZIP	·····			[] A-J-:-:	ĺ
TITLE		DELETE	5.1 TITU				Change	Addition	
NAME			5.2 NAM						
STREET ADDRESS			1	EET ADDRESS					
CITY-ST-ZIP				-ST-ZIP				□ Addition	1
TITLE		☐ DELETE	6.1 TITL				Change	☐ Addition	
NAME			6.2 NAM	⊫ ļ					١.

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

EZIKE KEGURED TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR