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

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **L65742**

1. Corporation Name

Dringinal Place of Business

CHARLES P. RANDALL, P.A.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90089 012 ***150.00

1600 S DIXIE HWY STE 5-AB ROYAL PALM TOWERS III BOCA RATON FL 33432 US		-160 S DINIE HAY 1600 S. DIXIE HI BAB STE 5-AB BOCA RATON FL 33432 US		DIXIE H	DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 04/11/1990
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21		26 1600 So. D	MIE	HWY	65-0199924 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required
City & State City & State					6. Election Campaign Financing 55.00 May Be
23		28			Trust Fund Contribution Added to Fees
	Zip Country Zip		Country		8. This corporation owes the current year Intangible
24	25 29 30		il .		Personal Property Tax.
	9. Name and Address of Curre				10. Name and Address of New Registered Agent
***			81	Name	· · · · · · · · · · · · · · · · · · ·
RANDALL, CHARLES P. 1600 S DIXIE HWY			82	Street Addr	ress (P.O. Box Number is Not Acceptable)
		-			
SUITE 5-AB BOCA RATON FL 33432			83		•
ВОС	A RATUN FL 33432		84	City	85 Zip Code
				'	oration submits this statement for the purpose of changing its registered
agent. I a	m familiar with, and accept the oblig-	ations of, Section 607.0505, Florida	Statutes	i	on's board of directors. I hereby accept the appointment as registered DATE
12.	. OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P/D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME .	RANDALL, CHARLES P.		1.2 NAME		
STREET ADDRÉSS	IS 1600 S DIXIE HWY #5AB		1.3 STREE	TADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY-S	T-ZIP	·
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS	235		2.3 STREE	T ADDRESS	
CITY-ST-ZIP	~		2. 4 CITY-5		
TITLE			3.1 TITLE		Change Addition
NAME		_	3.2 NAME		
STREET ADDRESS	•			T ADORESS	
	•		3.4. CITY-S	i	
CITY-ST-ZIP TITLE	· · · · ·	☐ DELETE	4.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Additio
		<u></u>	4. 2 NAME		-
NAME	,			T ADDRESS	
STREET ADDRESS	•				•
CITY-ST-ZIP		☐ DELETE	4.4 CITY-S 5.1 TITLE	11-41	Change Addition
TITLE	·	i Decere	5.1 NAME		
NAME	•	:	ŀ	T ADDRESS	** **
STREET ADDRESS			!		·
CITY-ST-ZIP		□ DELETE	5.4 CITY-S 6.1 TITLE	1-617	☐ Change ☐ Additio
TITLE		☐ DELETE			Citatige
NAME			6.2 NAME		
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP			6.4 CITY-S	T-ZIP	

CITY-ST-ZIP 14. 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.

SIGNATURE:

4-20.99

561.750.5050