

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L68801** (4)

1. Corporation Name

LAW OFFICES OF ANDREW B. BLASI, A PROFESSIONAL ASSOCIATION
k/n/a **BLASI & PIKE, P.A.**



Principal Place of Business

**7900 GLADES ROAD
SUITE 445
BOCA RATON FL 33434**

Mailing Address

**7900 GLADES ROAD
SUITE 445
BOCA RATON FL 33434**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

**BLASI, ANDREW B.
7900 GLADES ROAD
SUITE 445
BOCA RATON FL 33434**

3. Date Incorporated or Qualified
04/27/1990

3a. Date of Last Report
05/01/1995

4. FEI Number

65-0189365

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 607.1908, 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 607.0502, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if different from above) (Print Name)

Signature of New Registered Agent (Print Name)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
DPS	BLASI, ANDREW B.	7900 GLADES RD, STE 445	BOCA RATON, FL 33434	☐
				☐
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				☐

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

**Director/President
Blasi, Andrew B.**

**7900 Glades Road, Suite 445
Boca Raton, FL 33434**

**Director/Secretary/V.P.
Pike, Therese A.**

**7900 Glades Road, Suite 445
Boca Raton, FL 33434**

Change ☐ **Addition** ☒

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew B. Blasi, President

2/13/96

407-485-8700

CR2E034 (12/95)

3-20-1996