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Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90057 040 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L71134 1. Corporation Name

LAW OFFICES OF NORLIZA BATTS, P.A.

Principal Place	of Business	Mailing Address	•						
2805 E. OAKLAN	ND PARK BLVD.	2805 E. OAKLANI	d park blvd.						ů.
STE. 402		STE. #402			DO NOT WRITE IN THIS SPACE				
FT. LAUDERDALE FL 33306		FT. LAUDERDALE FL 33306 US			3. Date Incorporated or Qualifed				
US	•	US	•			05/04/1990	•		
						4. FEI Number	<u> </u>	Δ,	oplied For
2. Principal Pla	ace of Business	2a. Mailing Add	ress			1 "	,	<u> </u>	ot Applicable
21		26				65-0204535			Additional
Suite, Apt. 1	#, etc.	Suite, Apt. #	, etc.			5. Certifcate of Status Desired			equired
22		27				<u> </u>			
City & State	•	City & State	,			6. Election Campaign Financing			May Be to Fees
23		28				Trust Fund Contribution			to rees_
Zip	Country	Zip		intry		8. This corporation owes the curr	ent year inta	angibie ∐Yes	□No
24	25	29	30			Personal Property Tax.	Na minda di A		
	9. Name and Address of Current	t Registered Agent	.	 		10. Name and Address of New F	(egistered)	- Agent	
	1			81	Name		•		
BATT	rs, norliza	î A	·	82	Street Addre	ess (P.O. Box Number is Not Accepta	able)		
2805 E OAKLAND PK BLVD #402		. Conf				· · · · · · · · · · · · · · · · · · ·			V. Van Talkan Chang
FT. L	AUDERDALE FL 33306			83					問題到上
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	•			84	City		FL		
11. Pursuant office or re agent: I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligat	of Florida. Such char tions of, Section 607	nda Statutes, trie a nge was authorize .0505, Florida Stat	d by t tutes.	the corporation	on's board of directors. I hereby acce	pt the appoir	ntment as re	egistered
SIGNATURE		PA PA				d when reinstating)	DATE		
	Signature, typed or printed name of registered agen	nt and title if applicable.	(NO1E: Registered	a Ageni	t signature required	when redistating		D DIDECT	000 IN 12
		D DIDECTORS	42			ADDITIONS/CHANGES TO OF	·FICERS AN	ID DIKECT	URSINIZ
12.		D DIRECTORS	13. DELETE 117			ADDITIONS/CHANGES TO OF	FICERS AN	Change	Addition
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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 others in the proposed of the corporation of the receiver or trustee empowered.

STREET ADDRESS

6.4 CITY-ST-ZIP