PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L83124

1. Corporation Name

MARVIN P. STEIN, C.P.A., P.A.

| Principal Place of Business | | | | | | |
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| % MARVIN P. STEIN | | | | | | |
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Apr 06, 1999 8:00 am Secretary of State

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| Principal Place | e of Business | Mailing Address | | - I 1881/81: 901 (3100 11501 11918 libet aint ainti a | tiali alati alati stat | it Biatt taat |
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| % MARVIN P. STEIN | | % MARVIN P. STEIN 8603 S. DIXIE HIGHWAY #408 MIAMI FL 33143 | | DO NOT WRITE IN THIS | SPACE | |
| | , | | | 3. Date Incorporated or Qualifed 06/26/1990 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number | <u> </u> | ed For |
| 21 | <u> </u> | 26 | | 65-0197843 | | Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Add | |
| 22 | | 27 | | <u> </u> | | |
| City & Stat | e · | City & State | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 м Added to | |
| Zip | Country | | ountry | 8. This corporation owes the current year in | tangible | |
| 24 | 25 | 29 30 | | Personal Property Tax. | ∑XYes □ |]No |
| . , | 9. Name and Address of Current | | | 10. Name and Address of New Registered | Agent | |
| | | | 81 Name | | | Ì |
| | N, MARVIN P. | | 82 Street Addre | ess (P.O. Box Number is Not Acceptable) | | |
| 8603 S. DIXIE HWY | | | | | | |
| #40 | · · · · · · · · · · · · · · · · · · · | | 83 | | | 1 |
| MIAI | MI FL 33143 | | 84 City | | 85 Zip Co | de |
| · | | | | FL | | |
| office or r | to the provisions of Sections 607.0502 registered agent, or both, in the State of familiar with, and accept the obligat | nt Florida. Such change was authoriz | red by the corporatio | oration submits this statement for the purpose of on's board of directors. I hereby accept the appo | changing its re intment as regis | gistered stered |
| SIGNATURE | | | | | | |
| ! | Signature, typed or printed name of registered agen | | red Agent signature required | d when reinstating) ADDITIONS/CHANGES TO OFFICERS AT | UD DIRECTOR | C IN 12 |
| 12. | OFFICERS AN | | | ADDITIONS/CHANGES TO OFFICERS AT | Change | Addition |
| TITLE | D | | ITITLE | | | |
| NAME | STEIN, MARVIN P. | | NAME | | | |
| STREET ADDRESS | 8603 S. DIXIE HWY #408 | | STREET ADDRESS | | | } |
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| NAME STREET ADDRESS | | . 64 | | | □ cuaiñe | |

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.

CITY-ST-ZIP