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

PROFIT
CORPORATION
ANNUAL REPORT
1999

ALAN L. SCOTT, D.C., P.A.

DOCUMENT # M12806



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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

04-26-1999 90001 003 ***150.00

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Principal Place of Business Mailing Address) rannont fåt tilng tillat lätt dotte offt killt enen	QLEIG #1861	01011 44011 1001
2001 10TH AVE N 2001 10TH AVE N							
STE 2 SUITE 2							
LAKE WORTH FL 33461 LAKE WORTH FL 33461				DO NOT WRITE IN THIS SPACE			
US					3. Date Incorporated or Qualifed		ļ
2 Principal C	Place of Business	2= Mailing Address			03/19/1985		
2. Principal Place of Business 2a. Mailing Address 21					4. FEI Number	<u> </u>	plied For
21 26					59-2505405	A	t Applicable
			• •	-	5. Certifcate of Status Desired	\$8.75 A	I .
22						Fee Re	
23					6. Election Campaign Financing	\$5.00	
Zip			Country	Trust Fund Contribution Added to Fees Country 8 This corporation gives the current way laterstille		o Fees	
24	. 25	29	30		8. This corporation owes the current year Intangible Personal Property Tax.		
24	9. Name and Address of Current	11	[30]				L)NO
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name							
SCOTT, ALAN L.				Scott Alan L.			
3103 FOREST HILL BLVD.			82		ess (P.O. Box Number is Not Acceptable)		
WEST PALM BEACH FL 33406			83	2001	104 Ave N Ste	<u>: 2-</u>	
	7. 7. E. S. D. C. T. T. E. G. T. G.		63				}
		•	84	City / st	ke Worth FL	85 Zip C	ode
11. Pursuant to the provisions of Sections 907.050 and 607.1508. Florida Statutes, the above-named comporation submits this statement for the suppose of changing its projectional							
11. Pursuant to the provisions of Sections 607.05% and 607.1508, 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 are familiar with and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							[[
12.	2. OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTO	RS IN 12
TITLE -	PD	☐ DELETE	1.1 TITLE	PI		Change	☐ Addition
NAME .	SCOTT, ALAN L.		1.2 NAME		off, Alan L.	•	ĺ
STREET ADDRESS	3103 FOREST HILL BLVD.		1.3 STREET	ADORESS 2	OI 10th Ave N. Ste.)	,
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-ST	-ZIP -ZIP	LAKE WORTH F1. 33	461	•
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS	•		
CITY-ST-ZIP			2.4 CITY-ST		,		
TITLE		☐ DELETE	3.1 TITLE	-2114		Change	Addition
NAME			3.2 NAME			Jonarige	
STREET ADDRESS							
			3.3 STREET				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST	-ZiP		101	- A 1 355
NAME .			4.1 TITLE	ł	L] Change	☐ Addition
1			4. 2 NAME	Ì			}
STREET ADORESS			4.3 STREET	ADDRESS			İ
CITY-ST-ZIP			4.4 CITY-ST-	ZIP			
TITLE		☐ DELETE	5.1 TITLE		, 🗆] Change	Addition
NAME			5.2 NAME				.
STREET ADDRESS			5.3 STREET A	ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-	ZIP			
TITLE		☐ DELETE	6.1 TITLE] Change	Addition
NAME			6.2 NAME	ļ			-
STREET ADDRESS			6.3 STREET A	ODRESS			}
CITY-ST-ZIP			6.4 CITY-ST-	ZIP			1

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 of suppliemental ahnual 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 of the receiver of fustee 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 the statement with an address, with all other like empowered.