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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # M22387



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90042 006 ***150.00

LAW OF	Fices of David H. Zobe	RG, P.A.								
Principal Place	e of Business	Mailing Address				1	i podipoli ing sipio iland il	I DE 30111 1001 VIDIS O		311 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
C/O DAVID H.		C/O DAVID H. ZOBERG								
8367 BIRD RD. 8367 BIRD RD.						1				
MIAMI FL 33155 MIAMI FL 33155						<u> </u>		WRITE IN THIS	SPACE	
						3.	Date Incorporated or Qual	ifed		
						<u> </u>	10/24/1985			
2. Principal P	lace of Business	2a. Mailing Address				4.	FEI Number		<u> </u>	lied For
21		26				<u> </u>	<u>59-2596093</u>			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desire	d 🗆	\$8.75 A	
City & State	e	City & State				6.	Election Campaign Finance	ing 🗆	\$5.00 4	May Be
23		28					Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Cou	intry		8.	This corporation owes the	current year Into	angible	
24	25	29	30				Personal Property Tax.			□No
	9. Name and Address of Curren	nt Registered Agent				10.	Name and Address of No	w Registered	Agent	
70B	ERG, DAVID H.			81	Name					
	7 BIRD RD.			82	Street Addre	ess (P	O. Box Number is Not Acc	eptable)		
MIAI	MI FL 33155			83					6-8-7	
				84	City			FL	85 Zip C	ode
	to the provisions of Sections 607.050			Щ					changing its	ragistared
office or n agent. I a SIGNATURE	registered agent, or both, in the State on familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, Florida	authorized orida Stati	i by t utes.	the corporation	n's bo	pard of directors. I nereby a	ccept the appoin	ntment as reg	istered
	Signature, typed or printed name of registered age		E: Registered	Agen	t signature required	when is	ADDITIONS/CHANGES TO		D DIRECTO	RS IN 12
12.	PD OFFICERS AI	ND DIRECTORS	11 11	TI E			ADDITIONO/OFFICE FO		Change	Addition
TITLE	ZOBERG, DAVID H.				İ					
NAME	8367 BIRD RD.		1.2 N/							
STREET ADDRESS				IKEE	ADDRESS					
CITY-ST-ZIP	MIAMI FL		1		T71D I					
TITLE		□ DELETE	1.4 CI	ITY-ST	1-21			au.	Change	€ Addition
		☐ DELETE	1.4 CI 2.1 TI	TLE	1-21				☐ Change	Addition
NAME		☐ DELETE	1.4 CI 2.1 TI 2.2 N	TLE AMÉ				-	Change	Addition
STREET ADDRESS		☐ DELETE	1.4 Cl 2.1 Tl 2.2 N/ 2.3 St	TLE AMÉ TREET	ADDRESS		<u> </u>	-	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 other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP