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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90089 020 ***150.00

DOCUMEN	VT#	1474	566

1. Corporation Name

MARTIN	J. HANNA, P.A.									
Principal Place	e of Business	Mailing Address	s					#*!(# WI) WIWII W	'All Bibti Bibli At	IBII EIEN (EBI
1515 UNIVERSIT	TY DRIVE	1515 UNIVERSIT	Y DRIVE							
SUTIE 214		SUTIE 214	. •							
CORAL SPRING	S FL 33071	CORAL SPRINGS	FL 33071			<u> </u>		RITE IN THIS	SPACE	
US		US				3.	Date Incorporated or Qualife	a		Ì
							03/30/1988			
2. Principal Pl	lace of Business	2a. Mailing Add	ress			4.	FEI Number		<u> </u>	plied For
21		26					65-0040477			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	f, etc.			5.	Certifcate of Status Desired		\$8.75 A Fee Rec	
City & State	ه د السيخ پايامه دراز دها مي سدين	City & State) .a			6.	Election Campaign Financin	gp	\$5.00 __	
23		28					Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip		Country		8.	. This corporation owes the c	urrent year Int		_
24	25	29	36	0			Personal Property Tax.			□No
	9. Name and Address of Curren	t Registered Agent					Name and Address of Nev	v Registered	Agent	
11481	ALA LIAPTIN I			81	Name					
	na, martin J. I NW 107th Ave.			82	Street	Address (I	P.O. Box Number is Not Acce	ptable)		-
COR	AL SPRINGS FL 33065			83						
		•		<u> </u>						
				84	City			FL	85 Zip C	;ode
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such char tions of, Section 607	nge was autr .0505, Florid	a Statutes	the corpo	oration's D	oard of directors. I hereby acc	ne purpose of cept the appoi	changing its ntment as reg	registered gistered
	Signature, typed or printed name of registered age	nt and title if applicable. ID DIRECTORS	(NOTE: Re	13.	nt signature r	required when	ADDITIONS/CHANGES TO		ID DIRECTO	RS IN 12
12.	D OFFICERS AN		DELETE	1.1 TITLE		1	ADDITIONS/OFFAROES TO	DI I IOLINO AI	☐ Change	Addition
NAME	HANNA, MARTIN J.	_		1.2 NAME						
	2521 NW 107TH AVE.				TADORESS					
STREET ADDRESS	CORAL SPRINGS FL			1.4 CITY-S						
CITY-ST-ZIP TITLE	CONAL SPRINGS PL		DELETE	2.1 TITLE	1-21	 			☐ Change	Addition
				2.2 NAME						
NAME					TADORESS	.]				
STREET ADDRESS						']				
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		DELETE	2.4 CITY-5 3.1 TITLE	1-ZIF	-			Change	Addition
TITLE	وه و درسیدورد	ال∟ سنجمريي سد:	-+ -4 1	3.2 NAME			د راد، شد قد د	= ± =		
NAME OTDEET ADDRESS					T ADDRESS					l
STREET ADDRESS										j
CITY-ST-ZIP			DELETE	3.4. CITY-5 4.1 TITLE	21-41F	+	<u> </u>		Change	Addition
		Ь.		4. 2 NAME					_ `	
NAME					T ADDRESS					
STREET ADDRESS	. 4					'				
CITY-ST-ZIP			DELETE	4.4 CITY-S 5.1 TITLE	1-417	+			Change	Addition
TITLE	ra at	LI (5.7 TITLE 5.2 NAME		1				
NAME					T ADDRESS					İ
STREET ADDRESS				5.4 CITY-S						
CITY-ST-ZIP		П	DELETE	6.1 TITLE	·				Change	Addition
TITLE		<u>.</u>		6.2 NAME						_
NAME	I					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 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.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

OFFICER OR DIRECTOR