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 09, 1999 8:00 am
Secretary of State
04-09-1999 90044 037 ***150.00

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DOCUMENT # **P92000002539**

1. Corporation Name
BRADY & BRADY, P.A.

Principal Place of Business	Mailing Address
370 W CAMINO GARDENS BLVD SUITES 336 & 337 BOCA RATON FL 33432 US	370 W CAMINO GARDENS BLVD SUITES 336 & 337 BOCA RATON FL 33432 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 11/02/1992

2. Principal Place of Business	2a. Mailing Address
21 370 W. Camino Gardens Blvd	26 370 W. Camino Gardens Blvd.
Suite, Apt. #, etc. 22 Suite 200C	Suite, Apt. #, etc. 27 Suite 200C
City & State 23 Boca Raton FL	City & State 28 Boca Raton FL
Zip / Country 24 33432 25	Zip / Country 29 33432 30

4. FEI Number: 65-0361131 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BRADY, FRANK R
370 W CAMINO GARDENS BLVD
~~SUITE 341~~ Suite 200C
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name: BRADY, FRANK R.
82 Street Address (P.O. Box Number is Not Acceptable): 370 W Camino Gardens Blvd.
83: Suite 200 C
84 City: Boca Raton FL 85 Zip Code: 33432

11. Pursuant to the provisions of Sections 607.0502 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Frank R. Brady — DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	☐ DELETE	1.1 TITLE	D S	☐ Change ☑ Addition
NAME	BRADY, FRANK R		1.2 NAME	Jeanne C. Brady	
STREET ADDRESS	370 CAMINO GARDENS BLVD		1.3 STREET ADDRESS	370 Camino Gardens Blvd	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	Boca Raton FL 33432	
TITLE	ST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BRADY, FRANK		2.2 NAME		
STREET ADDRESS	370 CAMINO GARDENS BLVD		2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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.

SIGNATURE: Frank R. Brady SOLE Director — 4-1-99 — 561-338-9056
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)