

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P92000011771 (2)

1. Corporation Name

HOWARD L. ROSE, C.P.A., P.A.



Principal Place of Business

4901 N.W. 17TH WAY  
STE. 504  
NORTH LAUDERDALE FL 33309

Mailing Address

4901 N.W. 17TH WAY  
STE. 504  
NORTH LAUDERDALE FL 33309

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/15/1992

3a. Date of Last Report

04/25/1995

4. FEI Number

65-0374194

Applied For

Not Applicable

5. Certificate 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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

ROSE, HOWARD  
4901 NW 17TH WAY  
#504  
FT. LAUDERDALE FL 33309

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

Signature (owner, president or authorized agent of LLC) (Applicable)

Signature of Registered Agent (Signature required after reinstatement)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P  
ROSE, HOWARD  
P.O. BOX 16224  
PLANTATION FL 33318

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-ST-ZIP

PRESIDENT  
HOWARD L. ROSE  
4369 N.W. 103RD AVE  
SURFING, FL 33351

☐ Change ☐ Addition

2. TITLE  
3. NAME  
4. STREET ADDRESS  
5. CITY-ST-ZIP

☐ Change ☐ Addition

3. TITLE  
4. NAME  
5. STREET ADDRESS  
6. CITY-ST-ZIP

☐ Change ☐ Addition

4. TITLE  
5. NAME  
6. STREET ADDRESS  
7. CITY-ST-ZIP

☐ Change ☐ Addition

5. TITLE  
6. NAME  
7. STREET ADDRESS  
8. CITY-ST-ZIP

☐ Change ☐ Addition

6. TITLE  
7. NAME  
8. STREET ADDRESS  
9. CITY-ST-ZIP

100001873271  
-06/24/96--01040--016  
\*\*\*200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOWARD L. ROSE

4/30/96

954-938-8068

CR2E034 (12/95)