

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 # P93000000477 (8)

1. Corporation Name

MOORE & MENKHAUS, P.A.

Principal Place of Business

Mailing Address

4800 N FEDERAL HWY  
~~SUITE 201~~  
BOCA RATON FL 33431

*PLEASE CORRECT*

4800 N FEDERAL HWY  
~~SUITE 201~~  
BOCA RATON FL 33431



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 Suite 210-A  
City & State

27 Suite 210-A  
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

01/05/1993

3a. Date of Last Report

02/17/1995

4. FEI Number

65-0378521

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

MENKHAUS, DAVID J  
4800 N FEDERAL HWY  
~~SUITE 201~~  
BOCA RATON FL 33431

*PLEASE CORRECT*

81 Name

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

83

Suite 210-A

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]*

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
D	MOORE, W. RODGERS	4800 N FEDERAL HWY #201	BOCA RATON FL 33431	<input type="checkbox"/>
D	MENKHAUS, DAVID J	4800 N FEDERAL HWY #201	BOCA RATON FL 33431	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE	2. 2 NAME	3. 3 STREET ADDRESS	4. 4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		Suite 210-A		
2. 1 TITLE	2. 2 NAME	2. 3 STREET ADDRESS	2. 4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		Suite 210-A		
3. 1 TITLE	3. 2 NAME	3. 3 STREET ADDRESS	3. 4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. 1 TITLE	4. 2 NAME	4. 3 STREET ADDRESS	4. 4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. 1 TITLE	5. 2 NAME	5. 3 STREET ADDRESS	5. 4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. 1 TITLE	6. 2 NAME	6. 3 STREET ADDRESS	6. 4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/96

407 394-7910

Date

Day/Time Phone #

CR2E034 (12/95)