

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 28 PM 1:59

DOCUMENT # P93000000839 (9)

1. Corporation Name:

SUTO & BALDOVIN, P.A.

Principal Place of Business

**2424 N FEDERAL HIGHWAY
SUITE 405
BOCA RATON FL 33431
US**

Mailing Address

**2424 N FEDERAL HIGHWAY
SUITE 405
BOCA RATON FL 33431
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1993

3a. Date of Last Report

01/21/1994

4. FEI Number

65-0377818

Applied For

☐ Not Applicable

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

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City & State

City & State

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Zip

Country

Zip

Country

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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

9. Name and Address of Current Registered Agent

**BALDOVIN, PAUL A JR
2424 N FEDERAL HIGHWAY
SUITE 405
BOCA RATON FL 33431**

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent under Section 607.0505)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VO**
NAME **SUTO, ALEXANDER L**
STREET ADDRESS **2424 N FEDERAL HIGHWAY, SUITE 405**
CITY - ST - ZIP **BOCA RATON FL**

TITLE **PSTD**
NAME **BALDOVIN, PAUL A JR**
STREET ADDRESS **2424 N FEDERAL HIGHWAY, SUITE 405**
CITY - ST - ZIP **BOCA RATON FL**

TITLE
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CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 **TITLE** ☐ Change ☐ Addition

12 **NAME**

13 **STREET ADDRESS**

14 **CITY - ST - ZIP**

21 **TITLE** ☐ Change ☐ Addition

22 **NAME**

23 **STREET ADDRESS**

24 **CITY - ST - ZIP**

31 **TITLE** ☐ Change ☐ Addition

32 **NAME**

33 **STREET ADDRESS**

34 **CITY - ST - ZIP**

41 **TITLE** ☐ Change ☐ Addition

42 **NAME**

43 **STREET ADDRESS**

44 **CITY - ST - ZIP**

51 **TITLE** ☐ Change ☐ Addition

52 **NAME**

53 **STREET ADDRESS**

54 **CITY - ST - ZIP**

61 **TITLE** ☐ Change ☐ Addition

62 **NAME**

63 **STREET ADDRESS**

64 **CITY - ST - ZIP**

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)(b), 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. 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] **PRESIDENT**
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

3/21/95
Date

(407) 361-0422
Telephone Number