

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000002306 (7)

1. Corporation Name

JEFFREY G. KLEIN, P.A.



Principal Place of Business

2600 NORTH MILITARY TRAIL
SUITE 270
BOCA RATON FL 33431

Mailing Address

2600 NORTH MILITARY TRAIL
SUITE 270
BOCA RATON FL 33431

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

KLEIN, JEFFREY G
2600 NORTH MILITARY TRAIL
SUITE 270
BOCA RATON FL 33431

3. Date Incorporated or Qualified 01/08/1993	3a. Date of Last Report 01/13/1995
4. FEI Number 65-0383992	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	

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0702 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. Thereby accept the appointment, as registered agent, I am familiar with and accept the obligations of, Section 607.0708, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	☐ DELETE		☐ Change ☐ Addition
1. NAME PSTD KLEIN, JEFFREY 2600 N. MILITARY TRL #270 BOCA RATON FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, STATE 1.5 ZIP	☐ Change ☐ Addition
2. NAME	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, STATE 2.5 ZIP	☐ Change ☐ Addition
3. NAME	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, STATE 3.5 ZIP	☐ Change ☐ Addition
4. NAME	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, STATE 4.5 ZIP	☐ Change ☐ Addition
5. NAME	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, STATE 5.5 ZIP	☐ Change ☐ Addition
6. NAME	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, STATE	☐ Change ☐ Addition

14. I hereby certify that the information supplied in 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 included 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 registered business empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attached two-page list.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey G. Klein
Jeffrey G. Klein, P.A.

11/15/96

(407) 947-4050

CR2E034 (12/95)