1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000011680

1. Corporation Name

REBECC	A S. ROSENTHAL, P.A.							
	<u> </u>				-	E8181 11881 11818 81181 1		
Principal Place		Mailing Address	_					
190 w spanish river bl vd 190 w spanish river blvd - Ste-201 - Ste-201								
STE 201 STE 201 BOCA RATON FL 33431				DO NOT WRITE IN THIS SPACE				
US US					3. Date Incorporated or Qualifed			
					02/04/1993			
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apı	plied For	
21 1133	1	26			65-0393516	Not	t Applicable	
Suite, Apt.		Suite, Apt. #, etc.				\$8.75 A	dditional	
22		27			5. Certifcate of Status Desired	Fee Rec	<u>-</u> —	
City & State City & State					6. Election Campaign Financing	- \$5.00		
23 West F		28			Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year	ar Intangible ☐ Yes	E No	
24 3340	1 25 Palm Beach		30		Personal Property Tax. 10. Name and Address of New Registe			
	9. Name and Address of Current	Registered Agent	81 Name		10. Name and Address of New Registe	neu Agent		
ROSI	ENTHAL, REBECCA S) I Name				_	
190 W SPANISH RIVER BLVD				t Addres	ss (P.O. Box Number is Not Acceptable)	1		
STE	83 113	30	ld Okeechobee Road	-				
BOCA FRATON FL 33431			83					
200	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		84 City	st.	Palm Black	FL 85 Zip C	ode 40/	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	i Florida. Such change was au	s, the above-name	d como	ration submits this statement for the purporal's board of directors. I hereby accept the a	se of changing its appointment as rec	registered gistered	
SIGNATURE								
	Signature, typed or printed name of registered agent		Registered Agent signatur	required t	when reinstating) DAT ADDITIONS/CHANGES TO OFFICER		DC IN 12	
12.	OFFICERS AND	DELETE	13.	т	ADDITIONS/CHANGES TO OFFICER	Change	Addition	
TITLE	PD -							
NAME	ROSENTHAL, REBECCA S	OTT 404	1.2 NAME	ه برا	22 Ald Areechatee Paul	(
STREET ADORESS	190 W SPANISH RIVER BLVD /	SIE ZUI	1.3 STREET ADDRES	s 11 3	33 Old Okeechobee Road est Palm Beach, FZ	33401		
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MAME			■ U.Z (W/WIE	1				

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

OFFICER OR DIRECTOR

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90139 005 ***150.00