FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

P93000056856 (6)

DOCUMENT # P9(1. Corporation Name DEBORAH L. SARBEY, P.A.

Principal Place of Business Mailing

3721 THOMAS STREET HOLLYWOOD FL 33021

Mailing Address

3389 SHERIDAN STREET SUITE 145 HOLLYWOOD FL 33021 FILED Feb 02 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/13/1993

	Place of Business	2a. Mailing Address			4. FEI Number		Ar	oplied For
21		26		65-0420225		No	ot Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
27				S. Commonder of Clarge Desired	LL	Fee Re	equired	
City & State City & State					6. Election Campaign Financing		\$5.00	May Be
23 28			a kanananan Pira sananan sanan sanan salah isa papunya di sananan sa		Trust Fund Contribution		Added	to Fees
Zip	Country	^p	Country		8. This corporation owes or has pa	aid the cu	rrent year Int	angible
24 25 29 30			30		Personal Property Lax due June			No
	Name and Address of Current	t Registered Agent	- 81		10. Name and Address of New Re	egistered	Agent	
Sarbey, Deborah L				Name				-
3721 THOMAS STREET				82 Street Address (P.O. Box Number is Not Acceptable)				
HOLLYWOOD FL 33021				The state of the s				
			83					
			104	1 7.6 .			I==1 =:-	
			84	City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Statut	es, the above	-named corpo	oration submits this statement for the on's board of directors. I hereby acce		t changing it	s registered
office or i	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was a	authorized by	the corporation	on's board of directors. I hereby acce	pt the app	ointment as	registered
-	en actiliar with, and accept the doilige	anous out goethou dôt daôta' tur	waa olalules					
SIGNATURE Signature, typed or printed name or registered agent and title if applicable. INOTE. Registered Agent signature required when reinstating: 1941								
12.	OFFICERS AND DIRECTORS 13.			:	ADDITIONS/CHANGES TO OFFI	****	DIRECTOR	S (N 12
īiīLE	D	☐ DFLE1E	1.1 TITLE				Change	Addition
NAME	SARBEY, DEBORAH L		1.2 NAME					
STREET ADDRESS.	3721 THOMAS STREET		1.3 STREET	ADORESS:				
CITY-ST-ZIP	HOLLYWOOD FL 33021		1.4 CITY-3					
TRUE		DELETE	at mue	1-7!1	AND		Change	Addition
NAME		*****	22 NAME					
STREET ADDRESS			23 STREET	Anness				
OTY-ST-ZIP			2 4 CiTY-8	i i				ĺ
TITLE		☐ DELETE	31 HILE	1-24	CONTRACTOR OF THE PROPERTY OF		Change	Addition
NAME		Branch	3.2 NAME	[Pered	
STREET ADORESS			3.3 STREET	ACIDECC				
CITY-ST-JIP TITLE		I T DELETE	3.4. CITY-S	1-2IP	er er mar er er minnen minn men men men men men en men men men me		Change	Addition
NAME		they southly	4.1 TELLE	1			l∽¶ Alianôc	Addition
			4.2 NAME					
STREET ADDRESS			4.3 STREET					1
CHY-ST-ZIP		BATT	4.4 CITY - SI	- ZIP				
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			52 NAME	[}
STREET ADDRESS			5.3 STREET	ADDRESS				ļ
CITY-ST-ZIP	and and the state of the state	A STATE OF THE STA	54 CΠY+S1	- ¿IP				
TITLE		() DFLETE	6.1 TITLE	1			Change	Addition
NAME			52 NAME	ŀ				1
STREET ADDRESS			6.3 STREET	ADDRESS				İ
Gity - St - ZiP			64 CITY-ST	- ZIP				
14. I hereby o	ertily that the information supplied wi	th this filing does not quality to	or the exempt	on stated in S	section 119.07(3)(i), Florida Statutes, I	further ce	rtity that the	information

14. I hereby certify that the information supplied with this filing does not quality 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 early, 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: DEVOYAR) SEVENUERS

1/21/98

(305)862-0605