

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

0229074

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90007 033 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000062725

1. Corporation Name
LINDA C. SINGER, P.A.

Principal Place of Business 255 ALHAMBRA CIR SUITE 610 CORAL GABLES FL 33134 US	Mailing Address 255 ALHAMBRA CIR SUITE 610 CORAL GABLES FL 33134 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/01/1993

4. FEI Number 65-0435639	Applied For <input type="checkbox"/> Not Applicable
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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 owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business 21 9130 S. Dadeland Blvd. Suite, Apt. #, etc. 22 1609 City & State 23 Miami, FL Zip Country 24 33156 25 USA	2a. Mailing Address 26 9130 S. Dadeland Blvd. Suite, Apt. #, etc. 27 1609 City & State 28 Miami, FL Zip Country 29 33156 30 USA
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9. Name and Address of Current Registered Agent

**LINDA C SINGER
255 ALHAMBRA CIRCLE
SUITE 610
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name Linda C. Singer
82 Street Address (P.O. Box Number is Not Acceptable) 9130 S. Dadeland Blvd.
83 Suite 1609
84 City Miami 85 Zip Code FL 33156

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 *Linda C. Singer* **Linda C. Singer**

January 11, 1999

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	DPST <input type="checkbox"/> DELETE
NAME	SINGER, LINDA C
STREET ADDRESS	255 ALHAMBRA CIR STE 610
CITY-ST-ZIP	CORAL GABLES FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	9130 S. Dadeland Blvd., Suite 1609
1.4 CITY-ST-ZIP	Miami, FL 33156
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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.

SIGNATURE: *Linda C. Singer* **Linda C. Singer, Pres.** January 11, 1999 (305)670-5291

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)