

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000063280 (0)**

1. Corporation Name

DENNIS A. KOLTUN, P.A.

Principal Place of Business

**7101 S.W. 102ND AVE.
MIAMI FL 33173**

Mailing Address

**7101 S.W. 102ND AVE.
MIAMI FL 33173**



2. Principal Place of Business

2a. Mailing Address

21
22
23
24

State, Apt. #, etc.

City & State

Zip

Country

25

26
27
28
29

State, Apt. #, etc.

City & State

Zip

Country

30

9. Name and Address of Current Registered Agent

**KOLTUN, DENNIS A
7101 S.W. 102ND AVE.
MIAMI FL 33173**

3. Date Incorporated or Qualified
09/10/1993

3a. Date of Last Report
03/28/1995

4. FEI Number
65-0434282

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
82
83
84

Name

Street Address (P.O. Box Number is Not Acceptable)

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

DATE

12
101
NAME
STREET ADDRESS
CITY, ST, ZIP
102
NAME
STREET ADDRESS
CITY, ST, ZIP
103
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
CITY, ST, ZIP

**D
KOLTUN, DENNIS A
7101 S.W. 102ND AVE.
MIAMI FL 33173**

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13
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP
51 TITLE
52 NAME
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54 CITY- ST- ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

☐ Change ☐ Addition

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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)(k), 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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE: **Dennis A. Koltun**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/27/96 (305) 595 6791

CR2E034 (12/95)