PROFIT CORPORATION \*ANNUAL REPORT

1999



FLORIDA DEPARTMENT DF STATE

Katherine Har

Secretary of Star DIVISION OF CORPOR ATIONS

## DOCUMENT # **P94000032024**1. Corporation Name

ROSENTHAL APPRAISALS, INC.

		•	;		
Principal Plac	ce of Business	Mailing Address			- TOURISON THE TOUR STORY COURT COURT BETTER THE THE PARTY OF THE PART
837 GARNET ( WESTON FL 3 US		837 GARNET CIR WESTON FL 33326 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed
					04/25/1994
<u> </u>	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0482669 Not Applicable
Suite, Apt	<u></u>	Suite, Apt. #, etc.	,		5. Certifcate of Status Desired See Required
City & Sta	ite	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	Col		Trust Fund Contribution Added to Fees
Zip	Country	Zip	- T	ntry	8. This corporation owes the current year Intangible
24	25 25 9. Name and Address of Curre	29 Agent	30	r	Personal Property Tax. Yes No 10. Name and Address of New Registered Agent
<del>                                     </del>				81 Nan	
ROS	SENTHAL, GAIL			L	
16.45 837	GARNET CIRCLE		ì	82 Stre	eet Address (P.O. Box Number is Not Acceptable)
j FT I	Lauderdale fl 33326			83	
			,		
	• • •			84 City	85 Zip Code
.11. Pursuan	t to the provisions of Sections 607.05	02 and 607 1508, Florida Stat	utes, the a	L_I bove-name	ed corporation submits this statement for the purpose of changing its registered
Office of	registered agent, or both, in the State am familiar with, and accept the oblig	a of Florida. Such change was	autnonze	oy the co	orporation's board of directors. I hereby accept the appointment as registered
-		ations of, Section 607.0505, F	ionua Sia	utes.	
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable. (NO	TE: Registere	Agent signatu	re required when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.11	TLE	☐ Change ☐ Addition
NAME	ROSENTHAL, GAIL	•	1.2 N	ME	
STREET ADDRESS			1.3 \$1	REET ADDRES	SS
CITY-ST-ZIP	WESTON FL		1.4 C.I	TY-ST-ZIP	
TITLE	D	, DELETE	2.1 TI	JE	☐ Change ☐ Addition
NAME	ROSENTHAL, LEE		2.2 N	ME	
STREET ADDRESS	,		2.3 \$7	REET ADDRES	ss
CITY-ST-ZIP	WESTON FL	• (	2.4 CI	TY-ST-ZIP	
TITLE TOTALS	I wall on	DELETÉ	3.1 1∏	LE .	☐ Change ☐ Addition
NAME			3.2 NA	ME	
STREET ADDRESS			3.3 \$7	REET ADDRES	SS Company of the Com
CITY-ST-ZIP			3.4.01	TY-ST-ZIP	
TITLE	1	☐ DELETE	4.1711	LΈ	☐ Change → ☐ Addition
NAME			4. 2N	_	
STREET ADDRESS			4.3 ST	REET ADDRES	as a
CITY-ST-ZIP				Y-ST-ZIP	
TITLE	· ·	☐ DELETE	5.1 TiT		☐ Change ☐ Addition
NAME	)		5.2 NA		
STREET ADDRESS			<b>■</b> 53311	REET ADDRESS	
CITY-ST-ZIP	1 1				
			- 5.42IT	Y-ST-ZIP	
TITLE		□ DELETE	- 5.4CIT 6.1ITI	Y-ST-ZIP LE	S
NAME STREET ADDRESS	1/2   1	☐ DELETE	6.1TTI	Y-ST-ZIP LE	Change ☐ Addition

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 opplements 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 or the receiver of trustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information indicated on this annual report of officer or director of the corporal Block 12 or Block 13 if changed

6.4CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Jan 21, 1999 8:00am

**Secretary of State** 01-21-1999 90053 004 \*\*\*150.00

CR2E034 (11/98)