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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400036226 (6)

GEORGE R. HARPER, P.A.

Principal Place of Business

Principal Place of Business The Principal Place of Business The Principal Place of Business			200 S. BISCAYNE BLVD. Suite 4000 Miami Fl 33131-2398					
21					 Date Incorporated or Qualified 05/11/1994 	3a. Date of L 02/13/19		
	2a. Mailing A	Mailing Address			4. FEI Number		Applied For	
	26				65-0494217		Not Applica	
Suite, Apt #, etc	Suite, Ap 27				5. Certificate of Status Desired	4 1 7 -	75 Additiona se Required	
City & State	City & Sta 28	ate 			Election Campaign Financing Trust Fund Contribution		.00 May Be Ided to Fees	
Zip Cour			Country	y	8. This corporation has liability for it	ntangible tax un Yes No	der s. 199.032	
24 25 Name and Add	29 liress of Current Registered Age	nt	30		Florida Statutes 10. Name and Address of New Reg		-	
HARPER, GEORGE R	noss of Contain registered Age	,,,	81	Name	ID. Hallie this Address of their ries	Sistered Affect		
200 S. BISCAYNE BLVI)							
SUITE 4000	,		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
MIAMI FL 33131-2398			83					
						·		
			84	City		FL 85	Zip Code	
office or registered agent, or bo	octions 607.0502 and 607-1508, F oth, in the State of Floridal Such c occot the obligations of Section 6	hange was a	authorized b	y the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of chance	ing its registe nt as registere	
SIGNATURE								
	mulating terminally at an etlie if applicable	(TC:M)		ent signature requ	uireo when reinstating)	DATE		
	OFFICERS AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	EHS AND DIREC		
NAME HARPER, GEORG		J DECETE	1.1 TITLE				ange Auu	
	BLVD., STE. 4000		1.2 NAME	r apporce				
CITY - ST- ZIP MIAMI FL 33131-2				T ADDRESS				
TITLE		DELETE	2.4 CITY - 2.1 TITLE	51- ZIF		☐ Ch	ange Add	
NAME	_	,	2.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-SY-ZIP			2.4 CITY-					
TITLE		DELETE	3.1 TITLE	01-211		Ch	ange Add	
NAME			3 2 NAME				_	
STREET ADDRESS			3 3 STREE	I ADORESS				
City-\$1-ZiP			34 CITY-	ST-ZIP				
II*LE		DEL ETE	4.1 HTLE			Ch	ange 🔲 Add	
NAME			4. 2 NAME					
STREET ACCHESS			4.3 STREE	T ADDRESS				
CHY-S*-ZIP			4.4 Cilly-	ST-ZIP				
TITLE		DELETE	5 1 TITLE			Ch	ange 🔲 Add	
NAME			5 2 NAME					
STREET ADDRESS			5.3 STREE	T ADORESS				
C/TY+SI+ZIP			5.4 CITY -	ST · ZIP				
TITLE	Ĺ] DELETE	6 1 TITLE			☐ Ch	ange 🔲 Add	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	r address				
City-St-WP	····		6 4 CITY -		ed in Section 119.07(3)(i), Florida Statutes			

Lam 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: (I) (ay Gen. R. HARRISE D)

1/11/97 305.577-7010

FILED

Jan 17 1997 8:00am

Secretary of State