**PROFIT** CORPORATION ANNUAL REPORT



Mailing Address

5353 N. FEDERAL HWY

FLORIDA DEPARTMENT GASTATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED

**Secretary of State** 

03-02-1999 90039 035 \*\*\*150.00

Mar 02, 1999 8:00 am

1999

Principal Place of Business

5353 N. FEDERAL HWY

NAME

STREET ADDRESS

SIGNATURE: /

CITY-ST-ZIP

DOCUMENT # P9400069333 Corporation Name

C. COLON LEGAL AND ASSOCIATES, INC.

STE 403 STE 403 DO NOT WRITE IN THIS SPACE FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308 3. Date Incorporated or Qualifed 09/20/1994 Applied For 2a. Mailing Address 26 270 NE 51 Street 2. Principal Place of Business Not Applicable 到270 NE 51 Street 65-0524054 \$8:75 Additional Suite, Apt. #, etc. Suite, Apt. #, alc. 5. Certificate of Status Desired Fee Required 27 \$5.00 May Be 6. Election Campaign Financing City & State Ft. Lauderdale. Ft. Lauderdale Added to Fees Trust Fund Contribution This corporation owes the current year intangible Yes □ No Personal Property Tax. 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent ROEHM, DAN C JR 82 6011 NE 19 TERRACE FT LAUDERDALE FL 33308 83 84 City 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 Signature, typed or printed name of registered agent and title if applicab CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. President DELETE DI Change ☐ Addition 1.1 TOLE TITLE Roehm, Dan C. JR. 270 NE 51 Street 12 NAME NAME ROEHM, DAN C JR **6011 NE 19 TERRACE** 1.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33308 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change □ DELETE TITLE 21 TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY ST ZIP Change --OELETE: 4.1 TITLE -TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRES 4.4 CRTY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 61 TITLE m e

62 NAME

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 of fustee 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 attain with a address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP