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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P95000000901**1. Corporation Name

KINZBRUNNER & KINZBRUNNER, PA

FILED										
Feb	18,	1999	8:00am							
Sec	creta	ary of	f State							

02-18-1999 90081 048 ***150.00



Principal Place of Business Mailing Address					1								
4801 S UNIVER	ISITY DR	4801 9	S UNIVERSITY DR				1						
SUITE 3000 SUITE 3000													
DAVIE FL 33328 DAVIE FL 33328								DO NOT WRITE IN THIS SPACE					
US US					Date Incorporated or Qualifed 01/01/1995								
2. Principal P	lace of Business	2a. M	lailing Address				4.	FEI Number			App	plied For	
21		26					65-0541835			Not	t Applicable		
Suite, Apt.	#, etc.	Sı	uite, Apt. #, etc.				1		<u></u>	\$8.	.75 A	dditional	
22 27		27				5.	Certificate of Status Desired		F	ee Re	quired		
City & Stat	e	Ci	ity & State				6.~	Election Campaign Financing	· · · · ·	\$5	5.00	May Be	
23		28						Trust Fund Contribution	LJ			Fees	
Zip	Country	Zi	p	Count	try		8.	This corporation owes the cur	rent year Ir	tangible)		
24	25	29	34	0				Personal Property Tax.	•	☐ Ye	s	□No	
	9. Name and Address of Current	Register	ed Agent				10.	Name and Address of New	Registered	Agent			
4416.5				8	31	Name						. [
	BRUNNER, DAVID			-	32	Street Address	ee /D	.O. Box Number is Not Accept	able)				
	S UNIVERSITY DR			'	12	Street Addres	33 (F.	.o. box number is not Accept	aule)			-	
	E 3000			8	33								
DAVI	E FL 33328												
				8	34	City			FI	85	Zip C	ode	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1	1508, Florida Statutes.	the abo	ove-	-named corpor	ration	submits this statement for the		f changi	na its i	registered	
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. S	Such change was auth	orized t	oy t								
SIGNATURE													
	Signature, typed or printed name of registered agent a	and title if app	plicable. (NOTE: Re	gistered A	gent	signature required w			DATE				
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12.	OFFICERS AND	DIRECT		13.	-		A	ADDITIONS/CHANGES TO OF	FICERS A				
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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.

(954) 680-6114