## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P95000006098 (4)

VICKI & JERRY KOOTA, P.A.

## FILED Mar 20 1998 8:00am Secretary of State



1637 NW 100TH DRIVE CORAL SPRINGS FL 33071  1637 NW 100TH DRIVE CO		15	AA. 99 A Dal					TRICE BILL BRIEF	HARLARI ALLI	
CORAL SPRINGS FL 33071  CORAL SPRINGS FL 33071  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  01/24/1995  4. FEI Number  65-0561629  Not Applied For  Not Applied For  Not Applied For  Not Applied For  Suite, Apt. #, etc.  27  City & State  City & State  28  Zip  Country  B. This corporation owes or has paid the current year Imangible  Personal Property Tax due June 30. Yes No  Not Applied For  State of Status Desired  \$8.75 Additional  Fee Required  \$5.00 May Be  Trust Fund Contribution West or has paid the current year Imangible  Personal Property Tax due June 30. Yes No  No  10. Name and Address of New Registered Agent  FARMER, DANIEL R  1933 PEMBROKE RD  HOLLYWOOD FL 33020  82  Street Address (P.O. Box Number is Not Acceptable)  HOLLYWOOD FL 33020  83  Registered Agent is provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent I am Emiliar with autoaccept the obligations of. Section 607.05.05, Florida Statutes.  SIGNATURE  Signature type of period name or registered agent agent and 1607 agents agent age			Mailing Address							
3. Date (noorporated or Qualified 01/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Suite, Apt. #, etc Suite, Apt. #, etc Suite, Apt. #, etc 5. Certificate of Status Desired \$8.75 Additional Fee Required City & State 5. Certificate of Status Desired \$8.75 Additional Fee Required City & State 5. Country 5. Country 5. Country 6. Election Campaign Financing 5. 5. 00 May Be Added to Fees 7. Trust Fund Contribution 6. Trust Fund Contribution 7. Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. Yes No No							DO MOT WOITE IN THE	200405		
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-056 1629 Not Applied For Not Not Applied For Not Not Not Not Applied For Not						ļ.,		SSPACE		
2. Principal Place of Business 2. Mailing Address 3. FEI Number 4. FEI Number 5. Certificate of Status Desired						,	- ·			
Suite, Apt. #, etc.	9 Principal Pla	ne of Business	2a Mailing Address					Ar	polied For	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   South	<del>-</del>	Ue Of Dustriess					· ·	<del> </del>		
27 City & State City & State 28 Country Zip Country 29 30 Country 30 Registered Agent  Fee Required  6. Election Campaign Financing Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  FARMER, DANIEL R 1933 PEMBROKE RD HOLLYWOOD FL 33020  81 Name  10. Name and Address of New Registered Agent  82 Street Address (P.O. Box Number is Not Acceptable)  83 Signature in provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. 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 appracept the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  Signature byted or premied name or registered agent and this if applicable (NOTE Registered Agent signature required when reinstating)  DATE  DATE  DATE  DATE  Pagentered Agent signature required when reinstating)  DATE  DATE  DATE  DATE  Pagentered Agent signature required when reinstating)		etc						<del>- 4                                   </del>		
City & State  28  City & State  28  Country  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  See This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  FARMER, DANIEL R  1933 PEMBROKE RD  HOLLYWOOD FL 33020  81  Name  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  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 agent. I am familiar with analysecept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, byseld or pouled name of registered agent and letter applicable  (NOTE Registered Agent signature required when reinstalling)  DATE  DATE  TOWNSTANDER DATE OF STONE IN A DESCRIPTION OF	<del></del>	, 4					5. Certificate of Status Desired			
Zip Country Zip Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No							Election Campaign Financing \$5.00 May Be			
Zip Country Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. Yes No No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FARMER, DANIEL R 1933 PEMBROKE RD 82 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Experiment 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 agent. I am familiar with analysecept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature typed or poulted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstailing)  DATE  Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No No Property Tax due June 30. Yes No Property Tax due June 30. Yes No No	23		28				Trust Fund Contribution Added to Fees			
9. Name and Address of Current Registered Agent  FARMER, DANIEL R 1933 PEMBROKE RD HOLLYWOOD FL 33020  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 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 agent. I am familiar with analysaccept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature Issued or prelied agent and bit of applicable (Note Registered Agent signature required when reinstaling)  DATE  ON The Provision of New Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  11. Name  12. Name  13. Name  14. Name  15. Variety Address (P.O. Box Number is Not Acceptable)  16. Street Address of New Registered Agent  17. Name and Address of New Registered Agent  18. Name  18. Name  18. Name  18. Name  19. Street Address (P.O. Box Number is Not Acceptable)  18. Street Address of New Registered Agent  19. Name  19. Name  10. Name and Address of New Registered Agent  11. Pursuant to the provisions of Sections Agent Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607.0502 and 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent agent and bit of Agent Agent Statutes.  12. Date On the Address of New Registered Agent Ag		Country	Zip	Count	ry		<ol><li>This corporation owes or has paid the c</li></ol>			
FARMER, DANIEL R 1933 PEMBROKE RD HOLLYWOOD FL 33020  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 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 applicable of Provided agent and bit of applicable (NOTE Registered Agent signature required when reinstaling)  DATE  Particular Statutes agent and bit of applicable (NOTE Registered Agent signature required when reinstaling)	24			30					_  No	
1933 PEMBROKE RD HOLLYWOOD FL 33020  82 Street Address (P.O. Box Number is Not Acceptable)  83		9. Name and Address of Curren	Registered Agent		<u></u>		O. Name and Address of New Registers	d Agent		
HOLLYWOOD FL 33020  83  84 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 analysaccept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or prelifed agent and bit of applicable (NOTE Registered Agent signature required when reinstaling)  DATE  DATE				*	יין יי	name				
83 84 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 analysecept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or prelifed agent and bit of applicable (NOTE, Registered Agent signature required when reinstailing)  DATE  ODE TO STORY AND PROFESTIONS AND PROFESTI				8	2 S	Street Address	(P.O. Box Number is Not Acceptable)			
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 agent. I am familiar with analysecept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature required when reinstaling)  At Example 2. Signature required when reinstaling)  Date  Once 1.508  At 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 agent. I have a pointment as registered agent. I am familiar with analysecept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature required when reinstaling)  Date  Once 1.508  Date	HO	LLYWOOD FL 33020		-	<u>.</u>					
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 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, typoid or provided name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstailing)  DATE  On 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 agent. I have been supported by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with another corporation submits this statement for the purpose of changing its registered agent. I am familiar with another corporation submits this statement for the purpose of changing its registered agent. I have been supported agent and title of applicable (NOTE Registered Agent signature required when reinstailing)				ľ	3					
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 applicable to obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typoid or provided parent and bill of applicable (NOTE, Registered Agent signature required when reinstalling)  DATE  OATE  O				8	14 C	City	F	<b>85</b> Zip	Code	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board or directors. Thereby accept the appointment as registered agent. I am familiar with analysecept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typoid or position agent and title if applicable (NOTE, Registered Agent signature required when reinstailing)  DATE  OATE	11 Pursuant to	the provisions of Sections 607 0502	and 607.1508. Florida Statu	ites, the abo	 วงอ-กล	amed corpora	tion submits this statement for the purpose	of changing i	ts registered	
SIGNATURE Signature, typed or profited name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE  DATE	office or rec	olstored agent, or both, in the State.	of Florida. Such change was	authorized	DV IDE	e corporation's	s board of directors. I hereby accept the a	pointment as	registered	
Storature, typed or presented agent and bits of applicable (NOTE, Registered Agent signature required when reinstalling)  DATE  OFFICIENCE AND PROPORTION AN	•	Tarrillar with any accept the oblige		ionda Stato	.ca.		2/9/	ري:	İ	
ADDITIONO OF TAXABLE PROPERTY OF TAXABLE PROPE	SIGNATURE 5	ilodature, typod or printed name of registered age:	of and title if applicable (NO	TE Registered /	gent si	ignature required wi	hen reinstaling) DATE	<u>,                                    </u>		
161	12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A			
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 1  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	CITY-ST-ZIP			6.4 CITY	'-ST-ZI	riP ]	ation 110 07/2Vi) Elevido Statutos Liuribor	aartifu that the	n information	

4. 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 open attachment with an address.

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3/13/98 954-345-0140