

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000007575 (0)

1. Corporation Name

PAMELA I. SMITH, P.A.

Principal Place of Business

535 CENTRAL AVE.
ST. PETERSBURG FL 33701

Mailing Address

535 CENTRAL AVE.
ST. PETERSBURG FL 33701



3. Date Incorporated or Qualified

01/30/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 447 Third Ave N

26 447 Third Ave N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 304

27 Suite 304

City & State

City & State

23 St Petersburg, FL

28 St Petersburg, FL

Zip

Zip

24 33701

Country

Country

25 USA

29 33701

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, PAMELA I
535 CENTRAL AVE.
ST. PETERSBURG FL 33701

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

447 Third Avenue N #304

83

84

City St Petersburg

FL

85 Zip Code 33701

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of appointment

Date of Appointment

Date

12. OFFICERS AND DIRECTORS

TITLE D
NAME SMITH, PAMELA I
STREET ADDRESS 535 CENTRAL AVE.
CITY-ST-ZIP ST. PETERSBURG FL 33701

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

447 Third Avenue N #304
St Petersburg, FL 33701

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

600001897956
-07/18/96--01047--027
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8/13/94 8878

Daytime Phone #

CR2E034 (12/95)