

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90120 011 ***158.75

DOCUMENT # P95000021524

1. Corporation Name
R.L. MAGRAM, P.A.

Principal Place of Business
8055 SW 99 ST
MIAMI FL 33156

Mailing Address
8055 SW 99 ST
MIAMI FL 33156



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/16/1995

4. FEI Number

65-0561940

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 5740 SW 58 PLACE

Suite, Apt. #, etc.

22

City & State

23 Miami, FL

Zip

24 33143

Country

25 USA

2a. Mailing Address

26 5740 SW 58 PLACE

Suite, Apt. #, etc.

27

City & State

28 Miami, FL

Zip

29 33143

Country

30 USA

9. Name and Address of Current Registered Agent

MAGRAM, RONALD L
8055 SW 99 ST
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name

82 Street Address

83

84 City

Ronald L. Magram Esq.
R.L. Magram, P.A.
Florida Bar No. 128349
5740 S.W. 58 Place
Miami, FL 33143
Phone 305-740-7979

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, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/8/99

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MAGRAM, RONALD L

STREET ADDRESS 8055 SW 99 ST

CITY-ST-ZIP MIAMI FL 33156

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME Ronald L. Magram

1.3 STREET ADDRESS 5740 SW 58 Place

1.4 CITY-ST-ZIP Miami, FL 33143

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0214616

CR2E034 (11/98)