

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 25, 1999 8:00 am
Secretary of State

02-25-1999 90003 047 ***150.00

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DOCUMENT # P95000027982

1. Corporation Name

NATIONAL TAX ABATEMENT SERVICE INC



Principal Place of Business

718 VERONA COURT
WESTON FL 33326
US

Mailing Address

718 VERONA COURT
WESTON FL 33326
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/05/1995

2. Principal Place of Business

21 13270 S.W. 29 CT.

2a. Mailing Address

26 13270 S.W. 29 CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 DAVIE, FL

City & State

28 DAVIE, FL

Zip

24 33330

Country

25 USA

Zip

29 33330

Country

30 USA

4. FEI Number

65-0573946

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

9. Name and Address of Current Registered Agent

MCKEAN, JOHN F
718 VERONA COURT
FORT LAUDERDALE FL 33326

10. Name and Address of New Registered Agent

81 Name

JOHN F. MCKEAN

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

13270 S.W. 29 CT

83

84

City DAVIE

FL

85 Zip Code

33330

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

JOHN F. MCKEAN

JOHN F. MCKEAN Pres.

1/4/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MCKEAN, JOHN F
STREET ADDRESS 718 VERONA COURT
CITY-ST-ZIP FORT LAUDERDALE FL 33326

☐ DELETE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

JOHN F. MCKEAN

13270 S.W. 29 CT.

DAVIE, FL 33330

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☒ Change

☐ Addition

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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:

JOHN F. MCKEAN

Pres.

1/4/99

954-989-8699

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)