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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000048041 (4)

SUSAN K. BAUMEL, P.A.

750-0-DIXIE-HWY 2000 Blacks Rd

Mailing Address

FILED Mar 06 1998 8:00am Secretary of State



BOCA RATON FL 89492 5tz 400		BOCA RATON FL 33432		DO NOT WRITE IN THIS SI	PACE
	-7781	-210/		3. Date Incorporated or Qualified	
				06/16/1995	
	lace of Business	2a. Mailing Address	20 4	4. FEI Number	Applied For
21 200C			ADES RA	65-0598073	Not Applicable
22 5%	1 400	Suite, Apt. #, etc. 27 5tl 400		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 /3 OC 0	r Katon. H	City & State Poca Rate	m. FC	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 334	3/ 25 USA	29 3343/ 3	Country 84	This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered A	gent
BAUMEL, SUSAN K 81 Narr					
-750 G. Dixie Hwy .				ddress (P.O. Box Number is Not Acceptable)	
BOOA RATON FL 33432					
			83 54	Unn	
			84 Gity	700	85 Zin Code
			DOC.	a Katon FL	
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 engelered agent		Rogislered Agent signature n		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND I	
TITLE	D	☐ DELETE	1.1 TITLE	ła da	☐ Change ☐ Addition
NAME	BAUMEL, SUSAN K		1.2 NAME	SOOD SIDDES DI SE	44.1
STREET ADDRESS	-750 S. DIXIE HWY.		1.3 STREET ADDRESS	2000 GLAPES Rd Sta 200a Raton R 3243/	400
CITY-ST-ZIP	-BOGA RATON FL 33432		1.4 CITY - ST - ZIP	Boca Raton FC 3343/	
TITLE		☐ DELETE	2.1 TITLE	L	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DECETE	2 4 City-St-ZiP		7.6
		C) prese	3.1 TITLE	L	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	3.4. CITY - ST - ZIP		Totale I Addition
NAME		L. Detele	4.1 TITLE	L	Change Addition
l !			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP		7 65
NAME		C Dettie	5.1 TITLE	L	☐ Change ☐ Addition
· - · · · · ·			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Observa El Idellia
		L. J DECCTE	6.1 TITLE	. L	Change
NAME PROCESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		j
CITY-ST-ZIP	artify that the hidean time and the	M 2- 42	6.4 CITY-ST-ZIP		

receby 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.

Baune