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**

DOCUMENT # P95000068174

1. Corporation Name

22

City & State

CLAUDIA JO WILLIS, P.A.		I HANDAN KA KIRA AKIK BANK
Principal Place of Business	pal Place of Business Mailing Address	
600 NE 3 AVE FT LAUDERDALE FL 33304	600 NE 3 AVE FT LAUDERDALE FL 33304	
		DO NOT W
		3. Date Incorporated or Qualif 08/31/1995
2. Principal Place of Business	2a. Mailing Address	4, FEI Number
21	26	65-0606876
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired

27

City & State

FILED Jan 21, 1999 8:00am Secretary of State

01-21-1999 90043 042 ***150 00



DO NOT WRITE IN THIS SPACE

Applied For

Fee Required

\$5.00 May Be

Not Applicable \$8.75 Additional

Date Incorporated or Qualifed

6. Election Campaign Financing

23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes the current year Intangible 24 30 Personal Property Tax. □No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent WILLIS, CLAUDIA J Street Address (P.O. Box Number is Not Acceptable) 82 600 NE 3 AVE FT LAUDERDALE FL 33304 83 Zip Code 84 City 85 41. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. **PVST** ☐ DELETE TITLE 1.1 TITLE WILLIS, CLAUDIA J NAME 1.2 NAME **600 NE 3 AVE** 1.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33304 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE WILLIS, CLAUDIA J NAME 2.2 NAME **600 NE 3 AVE** STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL 33304 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE Change TITLE 3.1 TITLE NAME , 3.2 NAME 概で出す! こ STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE ☐ Change 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 40 5.4 CITY-ST-ZIP CiTY-ST-ZIP DELETE 6.1 TITLE Addition Change TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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.

January 6, 1999

Date

(954) 522-7744

Daytime Phone #

CR2E034 (11/98)