

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

FILED
Feb 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000079065 (5)

1. Corporation Name

THE LAW OFFICE'S OF FRANK TORAL, P.A.



Principal Place of Business

499 SHERIDAN ST #205
DANIA FL 33004

Mailing Address

499 SHERIDAN ST #205
DANIA FL 33004

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/13/1995

4. FEI Number

65-0612452

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 524 South Andrews Ave

2a. Mailing Address

26 524 South Andrews Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 303N

27 Suite 303N

City & State

City & State

23 Ft. Lauderdale, Fla

28 Ft. Lauderdale, Fla.

Zip

Country

Zip

Country

24 33301

25 Broward

29 33301

30 Broward

9. Name and Address of Current Registered Agent

TORAL, FRANK
499 SHERIDAN ST. SUITE 205
DANIA FL 33004

10. Name and Address of New Registered Agent

81 Name

TORAL, FRANK

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

524 South Andrews Ave

83

Suite 303N

84 City

Ft. Lauderdale

FL

85 Zip Code

33301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the
office or registered agent, or both, in the State of Florida. Such change was autho
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida

above-named corporation submits this statement for the purpose of changing its registered
ed by the corporation's board of directors. I hereby accept the appointment as registered
atutes.

SIGNATURE

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

(NOTE: Regi

ed Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME TORAL, FRANK
STREET ADDRESS 2538 CAMELOT CT.
CITY - ST - ZIP COOPER CITY FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE TORAL, FRANK ☒ Change ☐ Addition
1.1 NAME 524 South Andrews Ave
1.2 STREET ADDRESS Ft. Lauderdale, Fla. 33301
1.3 CITY - ST - ZIP ☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition
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.

CR2E034 (10/97)