

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 13, 1999 8:00 am
Secretary of State

07-13-1999 90001 012 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **P95000093720**

1. Corporation Name

THE LAW OFFICES OF C. VINCENT LOCURTO, P.A.

Principal Place of Business

**6245 NORTH FEDERAL HIGHWAY
SUITE 503
FT. LAUDERDALE FL 33308**

Mailing Address

**6245 NORTH FEDERAL HIGHWAY
SUITE 503
FT. LAUDERDALE FL 33308**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/11/1995

4. FEI Number

65-0626015

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. ☒ Yes ☐ No

2. Principal Place of Business

21 **2500 E. Commercial Blvd**

Suite, Apt. #, etc.

22 **Place of Bus**

23 **Fort Lauderdale, FL**

24 **33308**

25 **US**

2a. Mailing Address

Same as New

Suite, Apt. #, etc.

27 **Place of Bus**

28 **Fort Lauderdale, FL**

29 **33308**

30 **US**

9. Name and Address of Current Registered Agent

**LOCURTO, CLIFFORD V
6245 NORTH FEDERAL HIGHWAY
SUITE 503
FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name **LoCurto, Clifford V.**
82 Street Address (P.O. Box Number is Not Acceptable)
2500 E. Commercial Blvd
83 **Fort Lauderdale** FL 85 **33308**

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PCT** ☐ DELETE
NAME **LOCURTO, CLIFFORD V.**
STREET ADDRESS **6245 NORTH FEDERAL HIGHWAY SUITE 503,**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
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.C.T.** ☒ Change ☐ Addition
1.2 NAME **LoCurto, Clifford V.**
1.3 STREET ADDRESS **2500 East Commercial Blvd.**
1.4 CITY-ST-ZIP **FT Lauderdale FL 33308**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

586 734-90001-12
P 95000093720

Law Offices of
C. VINCENT LoCURTO, P.A.
2500 East Commercial Boulevard
Fort Lauderdale, FL 33308
Phone (954) 492-5542 Fax (954) 489-9993

July 6, 1999

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Law Offices, C. Vincent LoCurto, P.A.
1999 Annual Report

Dear Sir or Madam:

Per a phone conversation with your office of even date please be advised that we recently received a 2nd Notice of 1999 annual report packet and never received the first notice. Accordingly we are enclosing the return along with our check for \$150.00 for payment of the annual report fees without the late penalties. We were advised that due to some error several companies did not receive the first notice that the annual report was due. Thank you for your kind courtesy and cooperation.

Very truly yours,

The Law Offices of
C. VINCENT LoCURTO, P.A.



C. Vincent LoCurto, Esquire
For the Firm

CVL/mf

[Faint, mostly illegible text at the bottom of the page, likely a carbon copy or bleed-through from the reverse side.]