

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

0281409

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000001711 ✓

1. Corporation Name

PRINCESS GARTNER, INC.

99 JUL 26 AM 10:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 1523 NE 17TH WAY FT. LAUDERDALE FL 33304	Mailing Address 1523 NE 17TH WAY FT. LAUDERDALE FL 33304
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1996

4. FEI Number
65-0635526

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

GILBERTSON, STEPHEN W
2200 NE 26TH ST.
WILTON MANORS FL 33305

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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	DPST
NAME	GARTNER, PRINCESS
STREET ADDRESS	1523 NE 17TH WAY
CITY-ST-ZIP	FT. LAUDERDALE FL 33304

☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

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CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE ☐ Change ☐ Addition

12 NAME ☐ Change ☐ Addition

13 STREET ADDRESS ☐ Change ☐ Addition

14 CITY-ST-ZIP ☐ Change ☐ Addition

21 TITLE ☐ Change ☐ Addition

22 NAME ☐ Change ☐ Addition

23 STREET ADDRESS ☐ Change ☐ Addition

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition

32 NAME ☐ Change ☐ Addition

33 STREET ADDRESS ☐ Change ☐ Addition

34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE ☐ Change ☐ Addition

42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS ☐ Change ☐ Addition

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE ☐ Change ☐ Addition

52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS ☐ Change ☐ Addition

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE ☐ Change ☐ Addition

62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS ☐ Change ☐ Addition

64 CITY-ST-ZIP ☐ Change ☐ Addition

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****150.00 ****150.00

FITS

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:

Princess Gartner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Princess Gartner 7/8/99
Date

954-779-7966
Daytime Phone #

CR2E034 (11/98)

LAURENCE I. ARNOLD, M.D., P.A.

Plastic and Reconstructive Surgery

Surgery of the Hand

Cosmetic Surgery

MEMBER
AMERICAN SOCIETY OF PLASTIC AND
RECONSTRUCTIVE SURGEONS, INC.
BOARD CERTIFIED
DIPLOMATE OF THE
AMERICAN BOARD OF PLASTIC SURGERY

July 1, 1999

State of Florida
Division of Corporations

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RE: PRINCESS GARTNER

To Whom It May Concern:

Please be advised that the above named patient, Princess Gartner, was hospitalized on April 19, 1999, due to laceration of the flexor tendon of the right little finger, requiring surgical repair.

The patient has been unable to work for two months due to wearing a splint and having to undergo occupational therapy.

Please reconsider waiving the late fee for Mrs. Princess Gartner. I appreciate your consideration in this matter.

Sincerely,



Laurence I. Arnold, M.D.

LIA/tf