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 # P96000006817

1. Corporation Name

HARRY J. COUTLAKIS, C.P.A., P.A.

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90204 003 ***150.00



Principal Place	of Business	Mailing Address				1 44118 A1181 18181	()={
2941 N.E. 53RD COURT LIGHTHOUSE POINT FL 33064 2941 N.E. 53RD COURT LIGHTHOUSE POINT FL 33064			4		DO NOT WRITE IN THI	S SPACE	
					3. Date Incorporated or Qualifed	<u> </u>	
					01/19/1996		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	<u> </u>	plied For
21		26			65-0637421		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	¬		5. Certificate of Status Desired	\$8.75 A Fee Re	
22		27					
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country	, ,	8. This corporation owes the current year li		0.1000
24	25	29 30	_ `	'	Personal Property Tax.		□No
	9 Name and Address of Currer				10. Name and Address of New Registered	d Agent	
			81	Name			
COUTLAKIS, HARRY J			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
2941 N.E. 53RD COURT			_ ا	Olicotriat	arcos (r. e. box ramos ra recrisos primary		
LIGH	THOUSE POINT FL 33064		83				•
			84	City	F	85 Zip C	Code
·	997.050	1007 4500 FL 11 Ch-hid-	#		rporation submits this statement for the purpose of		registered
office or re	to the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was auth	norized by	tne corporat	tion's board of directors. I hereby accept the app	ointment as rec	gistered
SIGNATURE			_				
·	Signature, typed or printed name of registered age	<u></u>	_	nt signature requi	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	NO DIRECTO	DS IN 12
12.	PST OFFICERS AN	ID DIRECTORS	13. 1,1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition
TITLE	COUTLAKIS, HARRY J		1.2 NAME				
NAME STREET ADDRESS	2941 N.E. 53RD COURT		1	T ADDRESS			{
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	•	1.4 CITY-5				
TITLE		☐ DELETE	2.1 TITLE			Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	- · · · · ·		
TITLE		☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			ļ
CITY-ST-ZIP		[] as st	3.4. CITY-	ST-ZIP		[] Change	Addition
TITLE		☐ OELETE	4.1 TITLE	.		- Change	- Hoggson
NAME			4 2 NAME				
STREET ADDRESS				T ADDRESS			ţ
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	51-21		Change	☐ Addition
TITLE		C DECE	5.2 NAME				_
NAME STREET ADDRESS			1	TADORESS			
CITY-ST-ZIP			5.4 CITY-	}			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	1			Ì
STREET ADDRESS			6.3 STREE	T ADDRESS			
J			1				

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: