

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

**FILED**

**Jan 20 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 # P96000025770 (4)**  
1. Corporation Name  
**RAYMOND R. BEITRA, P.A.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
**407 LINCOLN ROAD SUITE 8-G MIAMI BEACH FL 33139**

3. Date Incorporated or Qualified  
**03/22/1996**

2. Principal Place of Business  
21 **2122 S.W. 67 Ave.**  
Suite, Apt. #, etc.

2a. Mailing Address  
26 **2122 S.W. 67 Ave.**  
Suite, Apt. #, etc.

4. FEI Number  
**65-0657824**  
Applied For  
 Not Applicable

22 City & State  
23 **Miami, Florida**

27 City & State  
28 **Miami, Florida**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

24 Zip **33155** 25 Country **U.S.A.**

29 Zip **33155** 30 Country **U.S.A.**

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

9. Name and Address of Current Registered Agent  
**BEITRA, RAYMOND R  
407 LINCOLN ROAD  
SUITE 8-G  
MIAMI BEACH FL 33139**

10. Name and Address of New Registered Agent  
81 Name **Beitra, Raymond R.**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2122 S.W. 67 AVENUE**  
83  
84 City **Miami** FL 85 Zip Code **33155**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>D BEITRA, RAYMOND R</b>	1.2 NAME	<b>Beitra, Raymond R.</b>
STREET ADDRESS	<b>407 LINCOLN ROAD SUITE 8-G</b>	1.3 STREET ADDRESS	<b>2122 S.W. 67 AVENUE</b>
CITY-ST-ZIP	<b>MIAMI BEACH FL 33139</b>	1.4 CITY-ST-ZIP	<b>MIAMI, Florida 33155</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Raymond R. Beitra* 1-7-98 305-265-8885

CR2E034 (10/97)