

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

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90059 011 ***150.00

DOCUMENT # P96000032658

1. Corporation Name
FRASER & FRASER, INC.

Principal Place of Business
1087 BEDFORD AVENUE
PALM BEACH GARDENS FL 33403

Mailing Address
1087 BEDFORD AVENUE
PALM BEACH GARDENS FL 33403

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1996

4. FEI Number
65-0659090

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

21 309 AVILA RS.
Suite, Apt. #, etc.

2a. Mailing Address

26 309 AVILA RS.
Suite, Apt. #, etc.

City & State

23 WEST PALM BEACH FL

City & State

28 WEST PALM BEACH, FL

Zip

24 33405

Country

25 PALM BCH

Zip

29 33405

Country

30 PALM BEACH

9. Name and Address of Current Registered Agent

FRSER, LINDA
1087 BEDFORD AVE
PLAM BCH GARDEN FL 33403

10. Name and Address of New Registered Agent

81 Name

LINDA FRASER

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

309 AVILA RS.

83

84 City

WEST PALM BEACH

FL

85 Zip Code

33405

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 Linda D Fraser
(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

LINDA FRASER

1/21/99

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE PSD
NAME FRASER, LINDA D
STREET ADDRESS 1087 BEDFORD AVENUE
CITY-ST-ZIP PALM BEACH GARDENS FL 33403

TITLE VTD ☐ DELETE

NAME ALEXANDER FRASER
STREET ADDRESS 1087 BEDFORD AVE.
CITY-ST-ZIP PALM BCH GARDENS FL 33403

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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 ☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

309 AVILA RS.

W. PALM BEACH, FL. 33405

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

309 AVILA RS.

W. PALM BEACH, FL. 33405

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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, with all other like empowered.

SIGNATURE: Linda D Fraser
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LINDA FRASER

Date

Daytime Phone #

1/21/99 835-3758

CR2E034 (11/98)

0023383