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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Härris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P 96000063842 1. Corporation Name Michael D. Rudolph, P. A.

Principal Place of Business

Mailing Address

1901 N. 13th Street

Ste 301	e 30i Same		DO NOT WRITE IN THIS SPACE	
Ybor City, FL 33605			3. Date Incorporated or Qualifed	
766, 61.77			7	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3399369	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Country 30	<ol> <li>This corporation.owes.the_current year the Personal Property Tax.</li> </ol>	Intangible Yes No
Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
michael a Rudolph 1901 N. 13th Street		81 Name		
		82 Street A	Street Address (P.O. Box Number is Not Acceptable)	
		83		· —

Yhor city, FL 33605 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.

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City

SIGNATURE

(NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE ☐ Change TITLE President 1.1 TITLE michael A. Rudolph 1.2 NAME NAME 1901 N. 13th Street, ste 301 1.3 STREET ADDRESS STREET ADDRESS Yhor City, FL 33605 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition ☐ Change 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME 33 STREET ADDRESS STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 51 TITLE Change ☐ Addition TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE Change ☐ Addition TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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:

SIGNING OFFICER OR DIRECTOR

4/27/99 (8:3) 248-2883

May 10, 1999 8:00 am

Secretary of State

05-10-1999 90281 005 \*\*\*150.00

CR2E034 (11/98)

Zip Code

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