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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000099356 (3)

1. Corporation Name

MICHAEL MALISZEWSKI, P.A.

Principal Place of Business

Mailing Address

930 NE JENSEN BEACH BLVD.
JENSEN BEACH FL 34957

930 NE JENSEN BEACH BLVD.
JENSEN BEACH FL 34957-4704



2. Principal Place of Business

2a. Mailing Address

21 215 S. Federal Highway

26 Suite, Apt. #, etc.

22 Suite 100

27 Suite, Apt. #, etc.

23 Stuart Florida

28 City & State

24 34994 Country

29 Zip Country

25 Martin

30 Zip Country

9. Name and Address of Current Registered Agent

MALISZEWSKI, MICHAEL
930 NE JENSEN BEACH BLVD.
JENSEN BEACH FL 34957

3. Date Incorporated or Qualified

12/09/1996

3a. Date of Last Report

first

4. FEI Number

65-0714710

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

3

10. Name and Address of New Registered Agent

81 Name

Michael Maliszewski

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

215 S. Federal Highway

83 Suite 100

84 City

Stuart

FL

85 Zip Code
34994

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 Michael Maliszewski

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/20/97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME MALISZEWSKI, MICHAEL
STREET ADDRESS 930 NE JENSEN BEACH BLVD.
CITY - ST - ZIP JENSEN BEACH FL 34957

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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, on an attachment with an address

SIGNATURE:

Michael Maliszewski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/97

Date

541
225-7010

Daytime Phone • 0011104

CR2E034 (9/96)