

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

PROFIT
CORPORATION
ANNUAL REPORT
.1998



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

FILED
Mar 27 1998 8:00am
Secretary of State

DOCUMENT # P97000003839 (2)

1. Corporation Name

RICHARD R. MICHELSON, P.A.



Principal Place of Business

Mailing Address

~~7101 WEST MCNAB ROAD~~
~~SUITE 200~~
~~TAMARAC FL 33321~~

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~~SUITE 200~~
~~TAMARAC FL 33321~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/10/1997

2. Principal Place of Business

2a. Mailing Address

21 7770 W. OAKLAND PARK BLVD.

26 7770 W. OAKLAND PARK BLVD.

4. FEI Number

65-0753783

Applied For

Not Applicable

22 Suite, Apt. #, etc.

100

27 Suite, Apt. #, etc.

100

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 City & State

SUNRISE, FL.

28 City & State

SUNRISE, FL.

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip

33351

25 Country

BLVD.

29 Zip

33351

30 Country

BLVD.

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

10. Name and Address of New Registered Agent

MICHELSON, RICHARD R ESQUIRE

7101 WEST MCNAB ROAD

SUITE 200

TAMARAC FL 33321

81 Name

MICHELSON, RICHARD R ESQUIRE

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

7770 W. OAKLAND PARK BLVD

83 SUITE 100

84 City

SUNRISE

FL

85 Zip Code

33351

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

Richard R. Michelson RICHARD R. MICHELSON

3/4/98

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME MICHELSON, RICHARD R ESQUIRE
STREET ADDRESS 7101 WEST MCNAB ROAD, SUITE 200
CITY-ST-ZIP TAMARAC FL 33321

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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.

SIGNATURE *Richard R. Michelson* RICHARD R. MICHELSON 7770 W. OAKLAND PARK BLVD SUITE 100 SUNRISE FL 33351

CR2E034 (10/97)