

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

FILED
Apr 24 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 # P97000013604 (8)

1. Corporation Name

WHITE & FLAM, P.A.

MICHAEL R. FLAM, P.A.

NC 4/1/98

Principal Place of Business

Mailing Address

2848 UNIVERSITY DRIVE
SUITE A, SECOND FLOOR
CORAL SPRINGS FL 33065

2848 UNIVERSITY DRIVE
SUITE A, SECOND FLOOR
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/11/1997

4. FEI Number

65-0737631

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2858 University Drive

Suite, Apt. #, etc.

22 Suite B, Second Floor

City & State

23 Coral Springs FL

Zip

24 33065

Country

25 Broward

2a. Mailing Address

26 2858 University Drive

Suite, Apt. #, etc.

27 Suite B, Second Floor

City & State

28 Coral Springs FL

Zip

29 33065

Country

30 Broward

9. Name and Address of Current Registered Agent

WHITE, E. AUSTIN
2848 UNIVERSITY DRIVE
SUITE A, SECOND FLOOR
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

Michael R. Flam

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

2858 University Drive

83

Suite B, Second Floor

84 City

Coral Springs

FL

85 Zip Code

33065

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 R. Flam, President

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

(NOTE: Registered Agent signature required when reinstating)

4-15-98

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME WHITE, E. AUSTIN
STREET ADDRESS 2848 UNIVERSITY DRIVE
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE VPSD ☐ DELETE

NAME FLAM, MICHAEL R
STREET ADDRESS 2848 UNIVERSITY DRIVE
CITY-ST-ZIP CORAL SPRINGS FL 33065

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

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME Michael R. Flam
1.3 STREET ADDRESS 2858 University Drive, Suite B, Second Floor
1.4 CITY-ST-ZIP Coral Springs, FL 33065

2.1 TITLE Treasurer ☐ Change ☒ Addition

2.2 NAME Michael R. Flam
2.3 STREET ADDRESS 2858 University Drive, Suite B, Second Floor
2.4 CITY-ST-ZIP Coral Springs, FL 33065

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 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 in an attachment with an address.

Michael R. Flam, President

4-15-98 954-753 0222

CR2E034 (10/97)