

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2007 8:00 am
Secretary of State

02-13-2007 90046 014 ***150.00

DOCUMENT # P97000063031

1. Entity Name

JODIE BASSICHIS, P.A.



Principal Place of Business
2455 HOLLYWOOD BLVD
SUITE 101
HOLLYWOOD FL 33020

Mailing Address
707 ST. ANDREWS ROAD
HOLLYWOOD FL 33021



2. Principal Place of Business - No P.O. Box #

4000 Hollywood Boulevard
Suite, Apt. #, etc. SUITE 350 N.

3. Mailing Address

4000 Hollywood Blvd
Suite 350 N

1st MOORE

CR2E034 (10/06)

City & State

Hollywood FL

City & State

Hollywood FL

4. FEI Number

65-0494466

Applied For

Not Applicable

Zip

33021

Country

USA

Zip

33021

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BASSICHIS, JODIE
2455 HOLLYWOOD BLVD
SUITE 101
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name

BASSICHIS, JODIE

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

4000 Hollywood Blvd,
Suite 350 N

City

Hollywood

FL

Zip Code

33021

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jodie Bassichis

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

(NOTE: Registered Agent signature required when reinstating)

2/1/07

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PVST ☐ Delete
NAME BASSICHIS, JODIE
STREET ADDRESS 707 ST. ANDREWS ROAD, SUITE 180
CITY ST ZIP FT. LAUDERDALE FL 33309

TITLE D ☐ Delete
NAME BASSICHIS, JODIE
STREET ADDRESS 707 ST. ANDREWS ROAD, SUITE 180
CITY ST ZIP FT. LAUDERDALE FL 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Jodie Bassichis

2/1/07

(954) 922-4464