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

PROFIT **CORPORATION** ANNUAL REPORT

1999

BIERMAN AND ASSOCIATES, INC.



DOCUMENT # P97000075557

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90223 042 ***158.75

Principal Place of Business Mailing Address									* 10011001 170 10111 1		ESII DULLS E		881 9 113		
8051 PLANTATION LAKES DR 8051 PLANTATION				KES DR											
PORT ST LUCIE	FL 34986	T ST LUCIE FL 34986				DO NOT WRITE IN THIS SPACE									
								3 Date	e Ir corporated o				JI AOI	_	
									29/1997	Qualifed					
2. Principa P	lace of Business	2a. Mailing Address							Number					Apr	lied For
21			26					65-6	0777937					+	Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.								A		\$8.		Iditional
22			27					5. Cert	ifcate of Status	Desired	B		F	ee Red	uired
City & S ate			City & State					6. Elec	tio i Campaign I	Financing			\$5	.00	May Be
23		28						Trus	st Fund Contribu	tion			Ac	ided to	Fees
Zip Country			Zip Cour			ntry g			8. This corporation owes the current year Intangible						
24	4 25		29 30					Personal Property Tax.					□No		
	9. Name and Address of Current	Regis	stered Agent			,		10. Nam	ne and Address	of New	Registe	red A	gent		
DIFF	ALAN DADDY				81	Na	me								
	MAN, BARRY				82	Str	eet Acd	ress (P.O. B	Box Number is N	lot Accept	table)				
8051 PLANTATION LAKES DR								· · · · · · · · · · · · · · · · · · ·							
PUR	T ST LUCIE FL 34986				83										
					84	Cit	·						85	Zip C	ode
						-	•					<u>FL</u>			
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florid	da. Such change was a	uthorized	by	the o	ned corporati	poration sub ion's board c	mits this statement of cirectors. I he	ent for the reby acce	purpos pt the a	se of c ppoin	:hangii tment	ng its i as reg	egistered estered
SIGNATURE			(107)	- B1-11	•			ed when reinslate			DATE				
12,	Signature, typed or printed naine of registered agent OFFICERS AND			13.	Agen	n signa	ture require		TIONS/CHANG	ES TO O			D DIRI	ECTO	S IN 12
TITLE	D	Unite	DELETE	1,1 TII	LE		Т				7,02		☐ Ch		Addition
NAME				.2 NAME											
STREET ADDRE IS 8051 PLANTATION LAKES DR				1.3 STRE		LADOR	ESS								1
CITY-ST-ZIP PORT ST LUCIE FL 34986				1.4 CITY-											
TITLE	V			_	2.1 TITLE							☐ Ch	ange	Addition	
NAME	BIERMAN, JENNIFER			£ 2.2 NA	2.2 NAME										
	STREET ADDRESS 8051 PLANTATION LAKES DR			2.3 ST		STREET ADDRESS									
CITY-ST-ZIP PORT ST LUCIE FL 34986			2.4		2. 4 CITY-ST-ZIP										
TITLE	, 0,,,, 0,, 200, 5			3.1 TIT									☐ Ch	ange	Addition
NAME				3.2 NA	ME										
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CITY+ST-ZIP				3.4. Cf	TY-S	T-ZIP									
TITLE			☐ DELETE	4.1 TIT									Ch	ange	Addition
NAME				4. 2 N	ME										
STREET ADDRESS				4.3 ST	REET	ADOR	ESS								(
CITY-ST-ZIP				4 4 CI											
TITLE	<u>-</u>			5.1 T/7								Ch	ange	Addition	
NAME				5.2 NA	ME										
STREET ADDRESS				5.3 ST	REET	FADDR	ESS								
CITY-ST-ZIP				5.4 CI	Y-S1	T-ZIP									
TITLE			☐ DELETE	6.1 TIT	LE								Ch	ange	☐ Addition
NAME				6.2 NA	ME										
STREET ADDRESS				63 ST	REET	ADOR	ESS								}

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 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 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 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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07 3)(i), Florida Statutes. I further certified in Section 119.07 3)(ii), Florida Statutes. I further certified in Section 119.07 3)(ii), Florida Statutes. I further certified in Section 119.07 3)(ii), Florida Statutes. I further certified in Section 119.07 3)(ii), Florida Statutes. I further certified in Section 119.07 3)(ii), Florida Statutes. I further certified in Section 119.07 3)(ii), Florida Statutes. I further certified in Section 119.07 3)(ii), Florida Statutes. I further certified in Section 119.07 3)(iii), Florida Statutes. I further certified in Section 119.07 3)(iii), Florida Statutes. I further certified

6.4 CITY-ST-ZIP

STREET ADDRESS