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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Mar 25 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000082576 (4)										
HOFFMAN, YATES & ASSOCIATES, INC.										
Principal Place of Business Mailing Address					<del></del>	_	<u> 90:01 intin ison o</u>		HO 0111 1001	
2235 EAST ORANGEHILL AVENUE 2235 EAST ORANGEHILL AV			AVENUE							
SUITE 100		SUITE 100	SUITE 100			DO NOT WRITE I	NI TILLIO ODACE			
PALM HARBO	OR FL 34683	PALM HARBOR FL 3488	LM HARBOR FL 34883			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
						09/24/1997				
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ar	oplied For	
21		26				59-3470398	Ī	_ + -	ot Applicable	
Suite, Apt. #, etc. Suite, Apt.			etc.			5. Certificate of Status Desired			Additional	
22		27				5. Certificate of Status Desired	<u> </u>	ee Re	equired	
City & State						6, Election Campaign Financing			May Be	
Zip	Country Zip C			tor					to Fees	
24	25	29	Coun	υy		This corporation owes or has paid     Personal Property Tax due June 3			angibie ∃No	
-	9. Name and Address of Curre		1301			10. Name and Address of New Regi			3.110	
AMERILAWYER CHARTERED					Name					
343 ALMERIA AVENUE				32	Street Addre	ess (P.O. Box Number is Not Acceptable	a)			
CORAL GABLES FL 33134					Opoci Magre	ass (1 .o. box number to not not public				
				33						
				14	City		FL 85	Zip (	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize					named coroo	oration submits this statement for the pur		ti onit	s registered	
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was	authorized	by t	the corporation	on's board of directors. I hereby accept	the appointme	nt as	registered	
1	m tamiliar with, and accept the oblig	lations of, Section 607.0505, FR	onda Statu	les.						
SIGNATURE	Signature, typed or printed name of registered ag	ent and little if applicable. (NOT	E Registered	Ageni	signature require	d when reinstating)	DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE				
TITLE	D DELETE		1.1 TITU	1.1 TITLE			☐ Ch	ange	Addition	
NAME	HOFFMAN, DANIEL Y			1.2 NAME						
STREET ADDRESS	2235 EAST ORANGEHILL AV	ENUE			}					
CITY-ST-ZIP	PALM HARBOR FL 34683	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		ZIP		Ch	2000	Addition	
TITLE	Detects		1	2.1 MILE 2.2 NAME				มเนิด	Addition	
NAME STREET ADDRESS			2.2 NAM 2.3 STRE		nonese					
CITY-ST-ZIP			2.4 CIT		1					
TITLE		DELETE	3.1 TITL				☐ Chi	ange	Addition	
NAME			3.2 NAM	ΙE						
Street Address			3.3 STRE	ET AD	DDRESS					
CITY-ST-ZIP			3.4. CIT	/- <b>S</b> T-	- ZIP					
TITLE		☐ DELETE	4.1 TITL	Ē			Chi	ange	Addition	
NAME			4. 2 NAN	4E						
STREET ADDRESS			4.3 STRE	ET AD	DDRESS				İ	
CITY-ST-ZIP		Drifte	4.4 CITY		ZIP		T 1 42		Addition	
TITLE		☐ DELETE	5.1 TITLE		İ		∐ Cha	urige	Addition	
NAME ATRICT ADDRESS			5.2 NAM						:	
STREET ADDRESS			5.3 STRE		1					
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITLE		ZIP		☐ Ch;	anne	Addition	
]			6.2 NAM					Br	- Application	
			6.3 STRE		UDBECS					
SINCE MUUNESS			0.33110	ואוי	JUNE 30					

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 of suppliemental annual report is true appacturate 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 trusted empeyored 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 that my name appears in the corporation of the c

6.4 CITY - ST - ZIP