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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED
May 13, 1999 8:00 am
Secretary of State
05-13-1999 90017 006 \*\*\*150.00

DOCUMENT # P970000 94709	
LARRY A GABAI, D.C., P.A.	

Principal Place of Business			~~.			
3651 NW 108 Dr.	3651 Nu	700	. •			
3651 NW 108 Dr. CORAL SPRINGS FL.3	CORAL	SPRING	. S	DO NOT WRITE IN	N THIS SPACE	
CORAL SPRINGS FL.3	3065 FL	3306	5	3. Date Incorporated or Qualified		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21	26			65-07922410		Not Applicable
Suite. Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	5 Additional~
22	27			5. Certificate of Status Desired	Fe	e Required
City & State	City & State			6. Election Campaign Financing	<b>\$</b> 5.	<b>00</b> May Be
23.	28			Trust Fund Contribution	Add	led to Fees
Zip Country	Zip	Country		8. This corporation owes the current y		_
24 25	29	30		Personal Property Tax.	Yes	□No
9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Regis	stered Agent	
I A COK N C N A ON		81	Name			
LARRY A.GABAY		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
3651 N.W. 108 D	h -					
		83				
CORAL SPRING	.s FL 3300	84	City		<b></b> 85	Zip Code
·	•		•		FL	·
11. Pursuant to the provisions of Sections 607.	0502 and 607.1508, Florida Stat	lutes, the above-	named com	poration submits this statement for the purp	ose of changing	g its registered
office or registered agent, both, in the St	ate of Florida, Such change was				e appointment a	s registered
the state of the s	manager of Section 607 0505	s authorized by ti Florida Statutes	he corporati	on's board of directors. Thereby accept the	• •	
	Section 607.0505, F	Florida Statutes.	he corporati	paration submits this statement for the purp ion's board of directors. I hereby accept the	•	
SIGNATURE	<u> </u>	Florida Statutes.	ne corporati	ed when reinstating)	ATE	
SIGNATURE Signature, typed or printed name of registered	<u> </u>	Florida Statutes.	ne corporati	unis board of directors. Thereby decept was	ATE RS AND DIRE	CTORS IN 12
SIGNATURE or printed name of registered 12. OFFICERS	agent and title if applicable. (NC AND DIRECTORS	Florida Statutes.	ne corporati	ed when reinstating)	ATE	CTORS IN 12
SIGNATURE Signature, typed or printed name of registered 12. OFFICERS TITLE LARRY A. G. M.	agent and title if applicable. (NC AND DIRECTORS DELETE	Florida Statutes.  TE: Registered Agent  13.	ne corporati	ed when reinstating)	ATE RS AND DIRE	CTORS IN 12
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indicated on this annual report or supplied with mis ming does not quality 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 the an attachment with an address with all other like empowered.

SIGNATURE:

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