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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000105468

1. Corporation Name

TAYLOR & PEREZ, P.A.

May 05, 1999 8:00 am Secretary of State

05-05-1999 90237 010 ***150.00

|--|

Principal Place of Business Mailing Address								
609 AZEELE STREET SUITE B TAMPA FL 33606			609 AZEELE STREET SUITE B TAMPA FL 33606					
ĺ						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
) 	
							01/01/1998 4. FEI Number Applied For	
2. Principal Place of Business			2a. Mailing Address					
21			26			_	5 9 - 39 8 2 5 70 Not Applicable \$8.75 Additional	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required	
22			27					
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23			Zip Country					
Zip Country							8, This corporation owes the current year Intangible Personal Property Tax.	
24	25 9 Name and Address	of Current		30		_	10. Name and Address of New Registered Agent	
	g, Name and Address	or current	Vadistelan Wäsur		81	Name	10. Nume und / Laurese St. No. 1 Vergiotet a Service	
SCH	AFFER, JAMES R			l l				
	W. VERNE STREET				82	Street Add	dress (P.O. Box Number is Not Acceptable)	
Sun			-		83			
	PA FL 33606				"			
I TAIVITA TE 33000			•		84	City	FL 85 Zip Code	
Do works the provision of Conference of Conference 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.								
agent. i a	ım tamıllar with, and accept	the obligation	ons of, Section 007.0005, Floi	iua Statu	les.			
SIGNATURE Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12. OFFICERS AND				13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DTS		☐ DELETE	1.1 TITLE			☐ Change ☐ Addition	
NAME	TAYLOR, TIMOTHY R			1.2 NAME				
STREET ADDRESS	609 AZEELE STREET	STE. B		1.3 STREE		ADDRESS		
CITY-ST-ZIP	TANDA EL AGGO		1.4 CIT	Y-ST	r-ZIP			
TITLE			2.1 ΠΤ	_		☐ Change ☐ Addition		
NAME	PEREZ, GERALD A			2.2 NAME				
STREET ADDRESS				2.3 STREET ADORE		ADORESS		
	TAMPA FL 33606			2. 4 CITY-ST-2				
CITY-ST-ZIP	17/14/17 1 E 00000		☐ DELETE	3.1 TIT		1-25	Change Addition	
NAME				3.2 NAME				
· ·				1		ADDRESS		
STREET ADDRESS				3.4. CIT				
CITY-ST-ZIP TITLE			☐ DELETE	4.1 TIT		1-48	☐ Change ☐ Addition	
				4. 2 NA				
NAME						ADDDESS		
STREET ADDRESS	1			4.3 STREET ADDRESS				
CITY-ST-ZIP	P ☐ DELETE		☐ DELETE	_	4.4 CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE	1			5.1 TITLE 5.2 NAME				
NAME	(- E		ADDRESS		
STREET ADDRESS								
CITY-ST-ZIP			☐ DELETE	5.4 CIT 6.1 TIT		1-ZIP	☐ Change ☐ Addition	
TITLE			☐ nere i e					
NAME				6.2 NA				
STREET ADDRESS	ì					ADDRESS		
CITY-ST-ZIP	!			6.4 CIT	Y-S1	T-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 on an attachment with an address, with all other like empowered.