PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000105537

1. Corporation Name

May 01, 1999 8:00 am Secretary of State

05-01-1999 90039 021 ***150.00

GREGOR	ry H. Fisher, P.A.					
					- Translanda (19 0 dekid k en dik en kid ara da ara da	H e n alu n en a anta (Hill III) (Hill
	· · · · · · · · · · · · · · · · · · ·					
Principal Plac	e of Business	Mailing Address				,
5520 FIRST AVENUE NORTH 5520 FIRST AVENUE NORTH						
ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710					DO NOT WRITE IN	HIS SPACE
					3. Date Incorporated or Qualifed	110 01 702
					12/15/1997	
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	¬		APPLIED FOR <u>59-1958</u>	2705 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22				5. Certifcate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip Country		8. This corporation owes the current year		
24 25 29			0		Personal Property Tax.	Yes No
	9. Name and Address of Currer	nt Registered Agent	-	l Name	10. Name and Address of New Registe	red Agent
EICL	ier, gregory h		81	Name		
5520 FIRST AVENUE NORTH			82 Street Address (P.O. Box Number is Not Acceptable)			
	PETERSBURG FL 33710					
01.	LIENOBONO TE GO, TO		83	<u> </u>		
•	•		84	City		85 Zip Code
						FL 85 210 0000
11. Pursuant	to the provisions of Sections 607,050 registered agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida, Such change was auth	, the above horized by	e-named corpo the corporatio	oration submits this statement for the purposen's board of directors. I hereby accept the a	ppointment as registered
agent. I a	im familiar with, and accept the obliga	tions of, Section 607.0505, Florid	la Statutés			,
SIGNATURE					(when reinstating) DAT	· ·
	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: RI	13.	nt signature required	ADDITIONS/CHANGES TO OFFICER	
12.	D OTTOERS AN	DELETE	1.1 TITLE	$\overline{}$	ADDITIONAL AND CONTROL OF THE CONTRO	Change Addition
NAME	FISHER, GREGORY H		1.2 NAME			
STREET ADDRESS	5520 FIRST AVENUE NORTH		1.3 STREET	T ADDRESS		ļ
	OT PETEROPURO EL 2074A		1.4 CITY-S	ì		
CITY-ST-ZIP		☐ DELETE.	2.1 TITLE	' -		Change Addition
NAME		_ :=: ,	2.2 NAME			
STREET ADDRESS		•	2.3 STREET	TADORESS		· · ·
CITY-ST-ZIP			2.4 C/TY-S			
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME	, £		3.2 NAME			'
STREET ADDRESS	1		L	T ADDRESS		
CITY+ST-ZIP		•	3.4. CITY-S	·		
TITLE		☐ DELETE 4.11				☐ Change ☐ Addition
NAME	· ·		4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE	·		☐ Change ☐ Addition
NAME	,		5.2 NAME	}	•	
STREET ADDRESS			5.3 STREE	TADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME		•	6.2 NAME			•
1						
STREET ADDRESS			6.3 STREE	T ADDRESS	£	ł

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.

727.3445520