

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

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90157 027 \*\*\*150.00

DOCUMENT # P97000108752

1. Corporation Name

ROMANIK AND HUSS, P.A.

Principal Place of Business

1901 HARRISON STREET  
HOLLYWOOD FL 33020

Mailing Address

P.O. BOX 1040  
HOLLYWOOD FL 33022

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1998

4. FEI Number

65-0801748

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 20170 Pines Boulevard

2a. Mailing Address

26 20170 Pines Boulevard

Suite, Apt. #, etc.

22 Suite 302

Suite, Apt. #, etc.

27 Suite 302

City & State

23 Pembroke Pines, FL

City & State

28 Pembroke Pines, FL

Zip

24 33029

Country

25 U.S.A.

Zip

29 33029

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

ROMANIK, DAVID S  
1901 HARRISON STREET  
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name

DAVID S. ROMANIK

82 Street Address (P.O. Box Number is Not Acceptable)

20170 Pines Boulevard

83

Suite 302

84 City

Pembroke Pines

FL

85 Zip Code

33029

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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.

SIGNATURE

*David S. Romanik*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-13-99

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ROMANIK, DAVID S  
STREET ADDRESS P.O. BOX 1040 N/A  
CITY-ST-ZIP HOLLYWOOD FL 33022

TITLE DVST ☐ DELETE

NAME HUSS, JOSEPH J  
STREET ADDRESS P.O. BOX 1040 N/A  
CITY-ST-ZIP HOLLYWOOD FL 33022

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition

12 NAME DAVID S. ROMANIK  
13 STREET ADDRESS 20170 Pines Boulevard, Suite 302  
14 CITY-ST-ZIP Pembroke Pines, FL 33029

2.1 TITLE D/V/S/T ☒ Change ☐ Addition

22 NAME JOSEPH J. HUSS  
23 STREET ADDRESS 20170 Pines Boulevard, Suite 302  
2.4 CITY-ST-ZIP Pembroke Pines, FL 33029

3.1 TITLE ☐ Change ☐ Addition

32 NAME  
33 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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.

SIGNATURE:

*David S. Romanik*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-99 954 441 4441

CR2E034 (11/98)