PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000003519**1. Corporation Name

ANTHONY J. NATALE, P.A.

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90074 050 ***150.00



D. L. I. Die	4 Di	Mailing Address			1 INCHES ILS (SIN) INDIC SECTION	**** ***** *****		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Principal Plac									
301 CLEMATIS STREET. STE 200 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401									
MESI LATM DESCRIPT 173401 MESI LATM DESCRIPT 173401					DO NOT WRITE I		SPACE		
				Ì	 Date Incorporated or Qualifect 01/12/1998 	l		· — —	
A District D	N A Ducinosa	2a. Mailing Address			4. FEI Number		I A	pplied For	
2. Principal Place of Business 21 502 Palm Street 22 502 Palm Street 25 502 Palm St			Street		65.0811967			ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				1			\$8.75	Additional	
22 Suite #4 27 Suite #4					5. Certifcate of Status Desired	Fee Required			
City & State A			Beach, Fo	ン	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			•	
Zip	Country	Zip Az 1161	Country	\ \ \	8. This corporation owes the cur	rent year in	3.27	_	
24 272	401 25 USA	29 19901 3	o USF	1	Personal Property Tax.		Yes	□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New	Registered	Agent		
16/0.03	ALEAL TIMOTHIN I		81 Nam	ne					
WHALEN, TIMOTHY L 301 CLEMATIS STREET, STE 200				82 Street Address (P.O. Box Number is Not Acceptable)					
WES	ST PALM BEACH FL 33401		83						
			84 City				85 Zip	Code	
	to the provisions of Sections 607.0502	_				<u>FL</u>		•	
SIGNATURE	am familiar with, and accept the obligati		legistered Agent signatu	re required w	rhen reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO O	FICERS A	ND DIRECT		
TITLE	D	☐ DELETE	1.1 TITLE	D		-	Change	☐ Additio	
NAME	NATALE, ANTHONY J		1.2 NAME	Na	tale, Anthony J 2 Palm Street,	#4			
STREET ADDRESS		201	1.3 STREET ADDRE	ss 50.	2 Palm Sires	~ ′ ~	3004		
CITY-ST-ZIP	WEST PALM BEACH FL 33401		1.4 CITY-ST-ZIP	We	st Palm Beach, 1	-U 3:	3401		
TITLE		☐ DELETE	2.1 TITLE		,		Change	Additio	
NAME			2.2 NAME	1				-	
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TITLE		☐ DELETE	3.1 TITLE		*		Change	·· [Addition	
NAME			3.2 NAME						
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NAME			5.2 NAME		•				
STREET ADDRESS	5		5.3 STREET ADDRE	SS	,		*		
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE		☐ DELETÉ	6.1 TITLE	`			Change	Additio	
NAME			6.2 NAME						
STREET ADDRESS	3		6.3 STREET ADDRE	SS					
	1		64 CITY-ST-ZIP	1					

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 suppliemental 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 feceiver or hostee 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 or an attachment with an address with all other like empowered.

SIGNATURE: