PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # POROCO14003

1. Corporatio	n Name	JO 1 40 00				
BONNIE	L. CANTY, P.A.					
J T	. =				1 2001/2013 100 47071 1004 2010 50011 60011 60110 61101 61101 61101 61101 61101 61101 61101 61101 61101 61101	10 00 100 10 0 100 1 00 0
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Principal Place of Business Mailing Address .					(((fill / 2 b) 10 b) 16 m (fill) boin admy gann adits wan drawn	55117 42123 1111 1251
3123 STATE	ROAD 7. SUITE 245	23123 STATE RO	DAD 7. SUITE 2	45	·	
OCA RATON		BOCA RATON F	L 33428		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
	-				02/12/1998	
2 Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
2. Principal Place of Business		26			165-0811674	Not Applicable
	# ate		Suite, Apt. #, etc.		\$8.	75 Additional
Suite, Apt. #, etc Suite, Apt. #, etc			.,	•		e Required -
City & Stat	te .	City & State			6. Election Campaign Financing 55	.00-May Be
3		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Country	8. This corporation owes the current year Intangible	
4	25	29	[30]		Personal Property Tax.	. □No
	9. Name and Address of Curre				16. Name and Address of New Registered Agent	
				81 Name		
WRIGHT, JANITA				82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
7302 S.W. 3RD COURT				Sugar Audiosa (1.5. Box Hallion 5. 16. 16. 16. 16. 16. 16. 16. 16. 16. 16		
NO	RTH LAUDERDALE FL 33068			83		ļ
	•			84 City	[85]	Zip Code
					FL T	· [
office or agent. I a SIGNATURE				Statutes,	oration submits this statement for the purpose of changings board of directors. I hereby accept the appointment is	
—	Signature, typed or printed name of registered age	ND DIRECTORS	(NOTE: Rap	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
1 <u>2.</u> M.E	D		DELETE	1.1 TITLE	Cha	
AME	CANTY, BONNIE L			12 NAME		1
TREET ADDRESS 23123 STATE ROAD 7 SUITE 245			1.3 STREET ADDRESS	•	-	
	BOOK BATON DI ARAGO			1.4 CITY-ST-ZIP		
JTY-ST-ZIP ITLE	DOOR INTOIT IE SOME			21 TITLE	□ Chr	ange [] Addition
WE	{	_		2.2 NAME		ſ
VANE STREET ADDRESS			•	23 STREET ADDRESS		j
•				2.4 CITY-ST-ZIP		
CITY-ST-ZIP				3.1 TITLE		ange DAddition
WAME		_		32 NAME	• •	
TREET ADDRESS				3.3 STREET ADDRESS		
	ή ,		1	3.4. CITY+ST-ZIP		
TTY-ST-ZIP				4.1 TITLE	□ Ch ₁	ange Addition
		_		4.2 NAME]
NAME				4.3 STREET ADDRESS		1
STREET ADDRESS	* •, ·			4.4 CITY-ST-ZIP		
CITY-ST-ZIP						
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mle		0	DELETE	5.1 TITLE 5.2 NAME	· · · · · · · · · · · · · · · · · · ·	ange 🗌 Addition

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 chapter 60, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

8,1 TITLE

62NAME

DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Change

Addition

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90006 005 ***158.75