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
Mar 30, 1999 8:00 am
Secretary of State
03-30-1999 90043 046 ***150.00

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DOCUMENT # P98000031195

1. Corporation Name
JILL H. BRICKEL, P.A.

Principal Place of Business	Mailing Address
580 SE 13TH STREET #203 DANIA FL 33004	580 SE 13TH STREET #203 DANIA FL 33004

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 04/02/1998

2. Principal Place of Business	2a. Mailing Address
21 20533 Biscayne Blvd	26 20533 Biscayne Blvd.
Suite, Apt. #, etc. 22 Suite #532	Suite, Apt. #, etc. 27 Suite #532
City & State 23 Aventura, FL	City & State 28 Aventura, FL
Zip 24 33180 Country 25 USA	Zip 29 33180 Country 30 USA

4. FEI Number: 65-0832747 ☐ Applied For ☐ Not Applicable

5. Certifcate 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BRICKEL, JILL H 580 SE 13TH STREET #203 DANIA FL 33004	81 Name: Jill H. Brickel, CPA 82 Street Address (P.O. Box Number is Not Acceptable): Brickel & Co., P.A. 83 20533 Biscayne Blvd., Ste #532 84 City: Aventura FL 85 Zip Code: 33180

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: Jill H. Brickel, CPA — 2/27/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	D., Pres.	☑ Change ☐ Addition
NAME	BRICKEL, JILL H		1.2 NAME	Jill H. Brickel	
STREET ADDRESS	580 SE 13TH STREET #203		1.3 STREET ADDRESS	3741 Sunny Isles Blvd, #151	
CITY-ST-ZIP	DANIA FL 33004		1.4 CITY-ST-ZIP	Sunny Isles, FL 33160	
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (11/98)

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: Jill H. Brickel — 2/27/99 — 305-933-9890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #