

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
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90023 011 ***150.00

DOCUMENT # P98000038854

1. Corporation Name

BIEGEN, SCHUNACK & COMPANY, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

251 CRANDON BLVD SUITE 820
KEY BISCAYNE FL 33149

Mailing Address

251 CRANDON BLVD SUITE 820
KEY BISCAYNE FL 33149

2. Principal Place of Business

21 1925 BRICKELL AVE

2a. Mailing Address

26 1925 BRICKELL AVE

Suite, Apt. #, etc.

22 STE D-1111

Suite, Apt. #, etc.

27 STE D-1111

City & State

23 MIAMI, FL

City & State

28 MIAMI, FL

Zip

24 33129

Country

Zip

29 33129

Country

30

9. Name and Address of Current Registered Agent

SCHUNACK, LISA A
251 CRANDON BLVD SUITE 820
KEY BISCAYNE FL 33149

3. Date Incorporated or Qualified

04/29/1998

4. FEI Number

65-0839532

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

10. Name and Address of New Registered Agent

81 Name

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

83 1925 BRICKELL AVE, STE D-1111

84 City MIAMI

FL

85 Zip Code 33129

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

LISA A. SCHUNACK

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

(NOTE: Registered Agent signature required when re-registering)

Lisa A. Schunack

1/25/99

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD
NAME SCHUNACK, LISA A
STREET ADDRESS 251 CRANDON BLVD SUITE 820
CITY-ST-ZIP KEY BISCAYNE FL 33149

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

1925 BRICKELL AVE, STE D-1111
MIAMI, FL 33129

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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

LISA A. SCHUNACK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/99

Date

305-826-4415

Daytime Phone #

CR2E034 (11/98)

0221480