

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
May 15, 1999 8:00 am
Secretary of State

05-15-1999 90012 041 ***150.00

DOCUMENT # P 78000044149

1. Corporation Name

Bowen, Lhota & Firtell, P.A. ✓

Principal Place of Business

Mailing Address

9871 Fairway Cove Lane
Plantation, FL 33324

9871 Fairway Cove Lane
Plantation, FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

May 15, 1998

2. Principal Place of Business

2a. Mailing Address

21 1000 West McNab Road
Suite, Apt. #, etc.

26 1000 West McNab Road
Suite, Apt. #, etc.

4. FEI Number

65-0836825 ✓

Applied For

Not Applicable

22 Suite 150

27 Suite 150

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Pompano Beach, FL

28 Pompano Beach, FL

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 33069 25 U.S.

29 33069 30 U.S.

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

David P. Lhota
9871 Fairway Cove Lane
Plantation, FL 33324

81 Name David P. Lhota

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

1000 West McNab Road

83 Suite 150

84 City Pompano Beach, FL

85 Zip Code 33069

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 P. Lhota, V.P.

4/27/99

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 P
NAME Bowen, Mark
STREET ADDRESS 9871 Fairway Cove Lane
CITY-ST-ZIP Plantation, FL 33324 ☐ DELETE

1.1 TITLE P
1.2 NAME Bowen, Mark D.
1.3 STREET ADDRESS 1000 West McNab Road
1.4 CITY-ST-ZIP Pompano Beach, FL 33069 ☒ Change ☐ Addition

TITLE VP
NAME Lhota, David P.
STREET ADDRESS 9871 Fairway Cove Lane
CITY-ST-ZIP Plantation, FL 33324 ☐ DELETE

2.1 TITLE VP
2.2 NAME Lhota, David P.
2.3 STREET ADDRESS 1000 West McNab Road
2.4 CITY-ST-ZIP Pompano Beach, FL 33069 ☒ Change ☐ Addition

TITLE ST
NAME Firtell, Ross
STREET ADDRESS 9871 Fairway Cove Lane
CITY-ST-ZIP Plantation, FL 33324 ☐ DELETE

3.1 TITLE ST
3.2 NAME Firtell, Ross
3.3 STREET ADDRESS 1000 West McNab Road
3.4 CITY-ST-ZIP Pompano Beach, FL 33069 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DAVID P. LHOTA V.P. 4/27/99 954-855725

CR2E034 (11/98)