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

DOCUMENT # P98000050226

1. Corporation Name

HOWARD A. KUSNICK, P.A.

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90039 031 ***150.00



Principal Plac	e of Business	Mailing Address					
8211 W BROWARD BLVD SUITE 420 8211 W BROWARD BLVD SI FT LAUDERDALE FL 33324 FT LAUDERDALE FL 33324							
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					06/04/1998		
	Place of Business	2a. Mailing Address	- 4	•		lied For	
21 300 NW & 2 Ave. 26 300 NW &			<u>2112</u>			Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired 5. Securificate of Status Desired 6. Securificate O			
22 505 27 505					Fee Req	uirea	
City & State City & State			,	6. Election Campaign Financing 5.00 May Be			
23 FONT	LAURENDALE, FL.	28 FORT LAUDEN			. Trust Fund Contribution Added to	Fees	
Zip	Country	Zip Z Z Z Z Z Z	Countr		8. This corporation owes the current year Intangible		
24 33.		29 33324 30	u	'SA	1 Torona Tropolity Text	<u>₹%</u>	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	· -	
1/11/	NUMBER OF THE PROPERTY OF THE		81		WOOD A KUSUICK		
KUSNICK, HOWARD A					dress (P.O. Box Number is Not Acceptable)		
8211 W BROWARD BLVD SUITE 420				300	NW 82 AVE SUIRSUE		
FT !	Lauderdale FL 33324		83	1	•		
			84	City	1.00 / / 2 85 Zip Co	nde	
			0^	Gity FUNT	LAUDONALE FL 85 333	374	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named con	noration submits this statement for the purpose of changing its fe	egistered	
office or s	registered agent, or both, in the State of	i Florida. Such change was auth	iorized by	the corporat	tion's board of directors. I hereby accept the appointment as regi	sterea	
agent. I a	am familiar with, and accept the obligation	MUN HOWAY		el cicario	v 1/12/97		
SIGNATURE	Signature, typed or printed name of registered agent a				red when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		∑ Change	☐ Addition	
NAME	KUSNICK, HOWARD A		12 NAME		9 10 12 H EDE		
STREET ADDRESS 8211 W BROWARD BLVD SUITE 420			1.3 STREE	TADDRESS 2	00 NW Band Ave # 505 -t. Laud. Fr 33324		
	FT LAUDERDALE FL 33324	.25	1.4 CITY-S	T-7IP	Et. Laud. Fr 33324		
CITY-ST-ZIP TITLE	TT ENGDERIDALE TE GOOZT	☐ DELETE	2.1 TITLE		☐ Change	Addition	
			2.2 NAME	}			
NAME				T ADDRESS			
STREET ADDRESS					·		
CITY-ST-ZIP		☐ DELETE	2.4 CITY-	ST-ZIP	☐ Change	Addition	
TITLE	1		3.1 TITLE	1	or the state of th		
NAME			3.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	F101	[_] V99;:;	
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME			5.2 NAME		•		
STREET ADDRESS			5.3 STREE	TADDRESS	•		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	TADDRESS			
				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 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.