

FILE NOW: FILING FEE AFTER MAY 1ST IS \$150.00

FILED  
Feb 02, 1999 8:00 am  
Secretary of State

02-02-1999 90018 046 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine I. Lewis  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000073401

1. Corporation Name  
ROBERT F ELLIOTT PA

Principal Place of Business: 7782 SNOWBERRY CIRCLE ORLANDO FL 32819  
Mailing Address: 7782 SNOWBERRY CIRCLE ORLANDO FL 32819



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/20/1998  
4. FEI Number: 593528816  
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

2. Principal Place of Business (21-24)  
2a. Mailing Address (25-28)  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country  
25. Suite, Apt. #, etc.  
26. City & State  
27. Zip  
28. Country

9. Name and Address of Current Registered Agent  
ELLIOTT, ROBERT F.  
7782 SNOWBERRY CIRCLE  
ORLANDO FL 32819

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83. City  
84. City  
85. Zip Code

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: Robert F Elliott DATE: 1/14/99

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes Robert F Elliott (PD) and Del Gallego, Alejandro (VD).

Table with 8 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Robert F Elliott DATE: 1/14/99

CR2E034 (11/98)