

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  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90124 017 \*\*\*150.00

DOCUMENT # P98000094906

1. Corporation Name

BOCA RATON SERVICES, INC.

Principal Place of Business  
2520 NW 16th Lane  
Bay II  
Pompano Beach, FL 33064

Mailing Address  
1921 East Atlantic Blvd.  
Pompano Beach, FL 33060

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
11/10/98

4. FEI Number  
65-0874450

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  
Persona Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

Leshin, Randall L.  
1921 East Atlantic Blvd.  
Pompano Beach, FL 33060

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME Ronald Zerra  
STREET ADDRESS 2520 NW 16th Lane, Bay II  
CITY-ST-ZIP Pompano Beach, FL 33064

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T ☐ Change ☒ Addition  
1.2 NAME Ronald Zerra  
1.3 STREET ADDRESS 2520 NW 16th Lane, Bay II  
1.4 CITY-ST-ZIP Pompano Beach, FL 33064

2.1 TITLE V ☐ Change ☒ Addition  
2.2 NAME Dolores L. Zerra  
2.3 STREET ADDRESS 2520 NW 16th Lane, Bay II  
2.4 CITY-ST-ZIP Pompano Beach, FL 33064

3.1 TITLE V ☐ Change ☒ Addition  
3.2 NAME Randolph Zerra  
3.3 STREET ADDRESS 2520 NW 16th Lane, Bay II  
3.4 CITY-ST-ZIP Pompano Beach, FL 33064

4.1 TITLE V ☐ Change ☒ Addition  
4.2 NAME Paula Zerra  
4.3 STREET ADDRESS 2520 NW 16th Lane, Bay II  
4.4 CITY-ST-ZIP Pompano Beach, FL 33064

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

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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(2)(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 307, 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:

Ronald Zerra: Ronald Zerra, President 4-12-99 561 392-5395

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

( anytime Phone #

CR2E034 (11/98)