PROFIT CORPORATION ANNUAL REPORT

1999

TILE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90004 019 \*\*\*150.00

DOCUMENT # P9800009	7365

Corporation Name	,001.000			
HATCH & DOTY, P.A.				
			E LOCKIDORI HIÙ POLICE NORM CONTR CERTO ARVIR OCTI	IZ LODIL K <b>eror</b> iki <b>r eriði ö</b> ril þ <b>óg</b> l
Principal Place of Business	Mailing Address		f 1885/1864 sig 1819) (1894) BTite gaint beint beft	THE LESTY LEADER TO SEE WHEN DAVIE LANDS
1701 HWY, AIA, STE, 220	1701 HWY, AIA, STE, 220	•		
VERO BEACH FL 32983	VERO BEACH FL 32963			
			DO NOT WRITE IN TH	IS SPACE
			3. Date incorporated or Qualifed	
			11/13/1998	
2. Principal Place of Business	2a. Malling Address		4. FEI Number 65-0887056	Applied For
21	26		63-000/036	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<u> </u>		
City & State	City & State		- 6Election Campaign Financing	\$5.00 May Be
23	28	Country	Trust Fund Contribution	Added to Fees
Zip Country	Zip .	Country	6. This corporation owes the current year	Intangible ☐ Yes ☐ No
24 25	29 3	<u> </u>	Personal Property Tax.  10. Name and Address of New Registers	
9. Name and Address of Curre	nt Registered/Agent	81 Name	10. Name and Address of New Registers	O viteur
DOTY VEHILS	<i>7</i>	o i vallo		
DOTY, KEVIN S			ress (P.O. Box Number is Not Acceptable)	
1701 HWY. AIA, STE. 220				
VERO BEACH FL 32963	\	83		
	<u> </u>	84 City		85 Zip Code
			F	
11. Pursuant to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig	stions of, Section 807.0505, Florid	a Statutes.	poration submits this statement for the purpose on's board of directors. I hereby accept the app	Silation to Jugaran
SIGNATURE				
Signature, typed or printed name of registered ag		egistered Agent signature require		
	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
me resident of Se		1.1 TITLE		☐ Change ☐ Addition
NAME Trac. Hat	ch of the	1.2 NAME		
STREET ADDRESS 1701 Hachwa	1 AIA, 518 220	1.3 STREET ADDRESS		;
STREET ADDRESS 1701 ptcghwa CITY-ST-ZP Vero Beach	FL 35-963	1.4 CITY-ST-ZIP		
THE VICE Presider	,	2.1 TITLE	,	Change Addition
NAME KOVIN S. DO	tu	2.2 NAME	·	
STREET ADDRESS 1701 Highway	ATA, Ste 220	2.3 STREET ADDRESS		
CITY-ST-ZP V.e. TO Beach	FL 32963	2.4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TILE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS	٠ ٠	3.3 STREET ADDRESS		a
CITY-ST-ZP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
•		4.2 NAME		
NAME		4.3 STREET ADDRESS		
STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST-ZIP		

6.4 CITY-ST-ZP

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 charged, or on an attachment with an address, with all other like empowered.

51 TILE

52 NAME

5.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

DELETE

DELETE

SIGNATURE: SIGNATURE AND TYPED OF PRINTED HERE OF STORMING OF FICER OF DIRECTOR

4/26/99 (561) 234-47/1

☐ Change

Change

☐ Addition

☐ Addition

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