**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000106875

MARC L. LUBET, P.A.

		_					
Principal Pla	ce of Business	Ma	iling Address			1 (4001) 231 (510) 4011 40114 6014 WATE SOME 411 (611) 18031 BIN 180	
209 E. RIDGEWOOD STREET 209 E. RIDGEWOOD STREET ORLANDO FL 32801 ORLANDO FL 32801					DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed	
		·····				12/22/1998 Applied For	
<b>−</b> , '	Place of Business	<u> </u>	Mailing Address			4. FEI Number 3548590 Applied For Not Applied	_
11 Subs. 451	t # ata	26	Suite, Apt. #, etc.			-\$8:75 Additional	
Suite, Apt. #, etc.		27	<del></del>			5. Certificate of Status Desired Fee Required	
City & Sta	ate		City & State			6. Election Campaign Financing \$5.00 May Be	
13		28	•			Trust Fund Contribution Added to Fees	
Zip	Country		Zip	Count	ry	This corporation owes the current year Intengible	
24	25	29		0		Personal Property Tax. Yes No	
	9. Name and Address	of Current Regist	ered Agent			10. Name and Address of New Registered Agent	
	FT 11100   F001775			18	1 Name		
	ET, MARC L ESQUIRE			Į.	2 Street A	idress (P.O. Box Number is Not Acceptable)	
209 E. RIDGEWOOD STREET			<u> </u>				
7 1L76 /	ANDO FL 32801				3		
OUD				°	<b>"</b>		
QND				L	4 City	E 85 Zip Code	
		- CO7 0502 and 60	7 1500 Florida Statuta	8	4 City	and the submits this statement for the purpose of changing its registers	ed .
		s 607.0502 and 60 the State of Florid the obligations of,	07.1508, Florida Statules a. Such change was au Section 607.0505, Florid	8	4 City	and the submits this statement for the purpose of changing its registers	ed .
11. Pursuari office or agent. I	at to the provisions of Section registered agent, or both, in am familiar with, and accept	the State of Florida the obligations of,	e, Such change was aut Section 607.0505, Florid	s, the aborized it	We-named copy the corporas.	orporation submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered	ed
11. Pursuari office or agent. I SIGNATURE	at to the provisions of Section registered agent, or both, in am familiar with, and accept Signature, typed or posted name of n	the State of Florida the obligations of, spatered agent and title if	e. Such change was aut Section 607.0505, Florid applicable. (NOTE R	the aborized to Statut	We-named copy the corporas.	onporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered used when rematating)  DATE	
11. Pursuan office or agent. I SIGNATURE 12.	at to the provisions of Section registered agent, or both, in am familiar with, and accept Signature, typed or posted name of n	the State of Florida the obligations of,	e. Such change was au Section 607.0505, Florid applicable. (NOTE R	s, the abordized to Statution Applications Application	Ve-named copy the corporas.	orporation submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered	2
11. Pursuan office or agent. I SIGNATURE 12.	at to the provisions of Section registered agent, or both, in am familiar with, and accept Signature, typed or printed name of the OFFI	the State of Florida the obligations of, spatered agent and title if	e. Such change was aut Section 607.0505, Florid applicable. (NOTE R	the abord to the statute of the stat	4 City we-named c y the corpor as.	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered are when rematating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
11. Pursuan office or agent. I SIGNATURE 12. TITLE	at to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or pointed name of in OFFI PVST LUBET, MARC L	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	e. Such change was au Section 607.0505, Florid applicable. (NOTE R	the aborded horized has Statut	4 City we-named c by the corpor as.	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered are when rematating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRES	at to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or printed name of the PVST LUBET, MARC L is 209 E. RIDGEWOOD ST	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	e. Such change was au Section 607.0505, Florid applicable. (NOTE R	i, the abored to statut epistered A. 13. 1.1 TITLL 12 NAM. 1.3 STR	Ve-named corporas.	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered are when rematating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRES CITY-ST-ZIP	at to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or pointed name of in OFFI PVST LUBET, MARC L	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	e. Such change was au Section 607.0505, Florid applicable. (NOTE R	the aborded horized has Statut	4 City We-named copy the corporals, First signature recent signature recen	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered are when rematating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2 dition
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRES CITY. ST-ZIP TITLE	at to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or printed name of the PVST LUBET, MARC L is 209 E. RIDGEWOOD ST	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	g. Such change was aut Section 607.0505, Florid spekcible. (NOTE R TORS	s, the above the foreign of the Statut spistered At 13. 1.1 TITLE 12 NAM 1.3 STRI 14 CITY 2.1 TITLE 14 TITLE 15	We-named copy the corporate signature rec	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or egent. I SIGNATURE 12. TITLE NAME STREET ADDRES CITY. ST- ZIP TITLE NAME	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or pointed name of in OFFI PVST LUBET, MARC L s 209 E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	g. Such change was aut Section 607.0505, Florid sppikeble. (NOTE R TORS	s, the abordorized it is Statut to Statut to Statut to Statut to Statut to Statut 13.  1.1 TITLL 12 NAM 1.3 STRI 1.4 CITY 2.1 TITLL 2.2 NAM	We-named corporals.  We have recorded to the corporals.  We have a support of the corporals.  We have a support of the corporals of the corporals.	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or agent. I SIGNATURE 12. ITILE NAME STREET ADDRESS CITY.ST-ZIP TITLE NAME STREET ADDRESS ST	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or pointed name of in OFFI PVST LUBET, MARC L s 209 E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	g. Such change was aut Section 607.0505, Florid sppikeble. (NOTE R TORS	s, the abordonized by Statution 13. 1.1 TITLL 12 NAM 1.3 STRI 14 CITY 2.1 TITLL 2.2 NAM 2.3 STRI 2.3 S	We-named corporate signature received the corporate signature rece	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or egent. i SIGNATURE 12. ITILE NAME STREET ADDRES CITY.ST-ZIP TILE NAME STREET ADDRES CITY.ST-ZIP	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or pointed name of in OFFI PVST LUBET, MARC L s 209 E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	g. Such change was aut Section 607.0505, Florid sppikeble. (NOTE R TORS	s, the abordorized it is Statut to Statut to Statut to Statut to Statut to Statut 13.  1.1 TITLL 12 NAM 1.3 STRI 1.4 CITY 2.1 TITLL 2.2 NAM	We-named copy the corporals.  For ADDRESS ST-ZIP SET ADDRESS -ST-ZIP	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or egent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or pointed name of in OFFI PVST LUBET, MARC L s 209 E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	a, Such change was aut Section 607,0505, Florid spekcible. (NOTE R TORS DELETE	s, the abordorized by Statution 13. 1.1 TITLL 12 NAM 1.3 STRI 1.4 CITY 2.1 TITLL 2.2 NAM 2.3 STRI 2.4 CITY 2.4	We-named copy the corporals,  well signature recent signa	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or agent. I SIGNATURE  12. TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME NAME	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or printed name of in OFFI PVST LUBET, MARC L so See E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	a, Such change was aut Section 607,0505, Florid spekcible. (NOTE R TORS DELETE	s, the abbrorized it as Statut epistered At 13. 1.1 TITLL 12 NAM 1.3 STRI 1.4 CITY 2.1 TITLL 2.2 NAM 2.3 STRI 2.4 CITH 3.1 TITLL 3.2 NAM 3.2 NAM	We-named copy the corporals.  For a support of the corporals.	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or printed name of in OFFI PVST LUBET, MARC L so See E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	a, Such change was aut Section 607,0505, Florid spekcible. (NOTE R TORS DELETE	opistored A 13. 1.1 TITU 12 NAM 1.3 STRI 1.4 CITY 2.1 TITU 2.2 NAM 2.3 STRI 2.4 CITY 3.3 TITU 3.3 STRI 3.3 STRI	We-named corporals.  We have corporals.  We take the corporals.	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or agent. I SIGNATURE  12. TILE NAME STREET ADDRESS CITY-ST-ZIP	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or printed name of in OFFI PVST LUBET, MARC L so See E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	a, Such change was aut Section 607,0505, Florid spekcible. (NOTE R TORS DELETE	s, the abbrorized it as Statut epistered At 13. 1.1 TITLL 12 NAM 1.3 STRI 1.4 CITY 2.1 TITLL 2.2 NAM 2.3 STRI 2.4 CITH 3.1 TITLL 3.2 NAM 3.2 NAM	We-named copy the corporals.  We have read alignature received the corporals.  We have received the corporals.  We have received the corporals.  We have received the corporals.	proporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Add	2 dition
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	of to the provisions of Section registered agent, or both, in am familiar with, and accept signature, typed or printed name of in OFFI PVST LUBET, MARC L so See E. RIDGEWOOD STORLANDO FL 32801	the State of Florid: the obligations of, spintered agent and title if CERS AND DIREC	a, Such change was aut Section 607,0505, Florid spokesble. (NOTE R  TORS  DELETE  DELETE	s, the above the format of the statut of the	We-named copy the corporals.  We have alignature received a second corporals.  We have a second corporals.  We have a second corporals.  We have a second corporal corporal corporals.	Orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered    DATE	2 dition

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 cath; that I am an officer or director of the porporation 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 it changed, or on an attachment with a made true.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CATY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ DELETE

DELETE

Change

Change

☐ Addition

Addition

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90204 018 \*\*\*150.00