

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 08:00 A
Secretary of State

DOCUMENT # P99000053006

1. Entity Name

BASSO, GROSS & FRIED, P.A.



Principal Place of Business

**2925 W. CYPRESS CREEK ROAD
SUITE 200
FORT LAUDERDALE, FL 33309**

Mailing Address

**2925 W. CYPRESS CREEK ROAD
SUITE 200
FORT LAUDERDALE, FL 33309**

DO NOT WRITE IN THIS SPACE



02012007 No Chg-P CR2E034 (11/05)

4. FEI Number

65-0925617

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GROSS, DANIEL T
2925 W. CYPRESS CREEK ROAD
SUITE 200
FORT LAUDERDALE, FL 33309**

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GROSS, DANIEL T
STREET ADDRESS	2925 W. CYPRESS CREEK ROAD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	VSTD
NAME	BASSO, LLOYD M
STREET ADDRESS	2925 W. CYPRESS CREEK ROAD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	VD
NAME	FRIED, STEVEN M
STREET ADDRESS	2925 W. CYPRESS CREEK ROAD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #