FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

SIGNATURE:

1996

DOCUMENT # \$17738

(3)

MR. DAN'S ORTHOPEDIC SHOE CLINIC, INC. Principal Place of Eusiness 2924 CENTRAL AVE ST PETERSBURG FL 33712 Mailing Address 2924 CENTRAL AVE ST PETERSBURG FL 33712										
2 Principal Pl	lace of Business	La Alexandra				11/30/19	-		te of Last 4/12/19	
2. Frincipar Pia 21	ace of business	2a. Mailing Address 26				4. FEI Number 59-303				Applied For
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.							- ¢g •	Not Applicable 75 Additional
City & State		27	, , , , , , , , , , , , , , , , , , , ,			5. Certificate or	of Status Desired			75 Additional se Required
City & State	•	City & State					mpaign Financing			.00 May Be
Zip	Country	28 Zip		nto		Trust Fund C	Contribution		Ado	ded to Fees
24	25	29	30	untry		8. This corporation of the statute o	ation has liability for	r intangible ta es 🌋 No	ax under	s 199.032,
	9. Name and Address of Curre	rent Registered Agent		Γ_			Address of New F		Anent	
MANCENT	4 ANTHIANS			81	Name			log.c.	Age	
	'I, ANTHONY NTRAL AVE		I	82	Street Add	ress (P.O. Box Numb	ner is Not Accepta	ible)		
	RSBURG FL 33712		1	\Box	l			Jio;		
₹ • • · = ·	TODOTTO: I L GOV IL		ļ	83	1					
				84	1 - 3			FL		Zip Code
SIGNATURE _	o the provisions of Sections 607.050 ed agant, or both, in the State of Flo h, and accept the obligations of, Sec Stgriduse typed or printed name of registered age. OFFICERS At				named corporation's board	c when reinstating)		DATE		
TIILE	D	DELETE	1.1 7/1			ADDITIONS/C	CHANGES TO OFF			
NAME	VINCENTI, ANTHONY	-	1.2 NA					L	Change	e
STREET ADDRESS	2924 CENTRAL AVE				ADDRESS					
CITY-ST-ZiP	ST PETERSBURG FL PST	N==	1 4 CIT	ITY-\$1-	1-2IP	<u></u>				
TITLE NAME	VINCENTI, ANTHONY	☐ DELETE	2 1 TIT						Change	Addition
STREET ADDRESS	2924 CENTRAL AVE		2 2 NA		1					
CITY-ST-ZIP	ST PETERSBURG FL				ADDRESS					
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FREET ADDRESS			63 STRE	σετ Δ'	DDece	•				
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