

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 09, 2005 08:00 AM
Secretary of State**

DOCUMENT # S31502

1. Entity Name
KENDALL LEGAL ASSOCIATES, INC.



Principal Place of Business

**8900 SW 107 AVE
SUITE 206
MIAMI, FL 33176**

Mailing Address

**8900 SW 107 AVE
SUITE 206
MIAMI, FL 33176**

DO NOT WRITE IN THIS SPACE



03182005 No Chg-P CR2E034 (10/03)

4. FCI Number
65-0243406

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MICHAEL G. BASS, P.A.
8900 SW 107 AVE
SUITE 206
MIAMI, FL 33176**

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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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000295857

04/11/05-80005-009 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**PDT
BASS, MICHAEL G.
8900 SW 107 AVE #206
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VPSD
KOBRIK, DAVID A
8900 S.W. 107TH AVE., #206
MIAMI, FL 33176**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 #

Michael G. Bass *Perpetual* *3/18/05* *305-585-9300*