

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 09, 1999 8:00 am
Secretary of State

07-09-1999 90021 004 ***150.00

DOCUMENT # **S36813**

1. Corporation Name

JEFFREY F. SPAR, PH.D., P.A.

Principal Place of Business

**9485 SW 72 ST (SUNSET DR)
A-222
MIAMI FL 33173
US**

Mailing Address

**9485 SW 72 ST (SUNSET DR)
A-222
MIAMI FL 33173
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1991

4. FEI Number

65-0247819

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00** May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

1 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

**SPAR, JEFFREY F.
9485 S W 72 ST
A222
MIAMI FL 33173**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

I. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

GNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
E	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
IE	SPAR, JEFFREY F.	1.2 NAME	
EET ADDRESS	11285 SW 92 PLACE	1.3 STREET ADDRESS	
ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
E	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
IE		2.2 NAME	
EET ADDRESS		2.3 STREET ADDRESS	
ST-ZIP		2.4 CITY-ST-ZIP	
E	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
IE		3.2 NAME	
EET ADDRESS		3.3 STREET ADDRESS	
ST-ZIP		3.4 CITY-ST-ZIP	
E	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
IE		4.2 NAME	
EET ADDRESS		4.3 STREET ADDRESS	
ST-ZIP		4.4 CITY-ST-ZIP	
E	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
IE		5.2 NAME	
EET ADDRESS		5.3 STREET ADDRESS	
ST-ZIP		5.4 CITY-ST-ZIP	
E	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
IE		6.2 NAME	
EET ADDRESS		6.3 STREET ADDRESS	
ST-ZIP		6.4 CITY-ST-ZIP	

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 changed, or on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

08552-40021-4



WOLPERT & KAUFMAN, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

ANTHONY H. WOLPERT, C.P.A.
JERRY R. KAUFMAN, J.D., LL.M., C.P.A.

(305) 670-1572
FAX (305) 670-2490

DADELAND TOWERS
9200 S. DADELAND BLVD.
SUITE 614
MIAMI, FLORIDA 33156

July 6, 1999

Division of Corporations
Annual Report Filings
P.O. Box 1500
Tallahassee, Fla. 32302-1500

Re: Jeffrey F. Spar, PHD., P.A.
Fed I.D. # 65-0247819

Gentlemen:

Enclosed is the 1999 Annual Report, together with a check in the amount of \$ 150.00 for payment of the 1999 fee. The taxpayer had not received their original report, and upon calling the State was advised to pay the regular fee when they received the 2nd notice, as the State was unable to send them a blank fax or mail them the form, prior to the original filing deadline of May 1, 1999. The taxpayer has always filed a timely report in the past, and is appreciative of the State accepting the report with the original amount due.

Sincerely:

Richard R. Ramler

cc: Jeffrey F. Spar