

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Jul 31 1998 8:00am
Secretary of State

DOCUMENT # S57615 (4)

1. Corporation Name
SAGE & GOLDMAN, P.A.

Principal Place of Business

3191 CORAL WAY
SUITE 201
MIAMI FL 33145-3218
US

Mailing Address

3191 CORAL WAY
SUITE 201
MIAMI FL 33145-3218
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/06/1991

4. FEI Number

65-0256640

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes ☐ No

9. Name and Address of Current Registered Agent

GOLDMAN, JEFFREY S.
217 N EOLA DR
ORLANDO FL 33801

10. Name and Address of New Registered Agent

81 Name

Jon Sage

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

3191 CORAL WAY PH 201

83

84 City

MIAMI

FL

85 Zip Code
33145

11. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	GOLDMAN, JEFFREY S.	
STREET ADDRESS	217 N EOLA DR	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SAGE, JON	
STREET ADDRESS	3191 CORAL WAY, SUITE 201	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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.

SIGNATURE:

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

7/9/98 (305) 444-9899

CR2E034 (5/98)

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LAW OFFICES OF
SAGE & GOLDMAN, P.A.

9350 SOUTH DIXIE HIGHWAY
SUITE 1270

MIAMI, FLORIDA 33156
TELEPHONE (305) 670-6626
FACSIMILE (305) 670-6788

JON B. SAGE
JEFFREY S. GOLDMAN

ORLANDO OFFICE
217 NORTH EOLA DRIVE
ORLANDO, FLORIDA 32801
(407) 843-8018

PLEASE REPLY TO:

July 27, 1998

Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314
Attn: Lee Yarbrough

Subject: Sage & Goldman, P.A.
Ref Number: S57615

Dear Mr. Yarbrough:

This letter shall confirm our telephone conversation of July 24, 1998, wherein we never received the first notice to file our Annual Report. Enclosed please find our Annual Report for 1998 along with our check in the amount of \$150.00 for filing.

If you have any questions or wish to discuss this matter in further detail, please feel free to contact me.

Very truly yours,

Sage & Goldman, PA

By:


Robert J. Provitz

RJO/eh