

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S80074

(5)

1. Corporation Name

RUDOLPH PARKER & ASSOCIATES, INC.

Principal Place of Business

1827 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020-4508

Mailing Address

P.O. BOX 223715
HOLLYWOOD FL 33022-3715

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

PARKER, RUDOLPH
300 PIERCE ST., #510
HOLLYWOOD FL 33020

3. Date Incorporated or Qualified

09/13/1991

3a. Date of Last Report

03/27/1996

4. FEI Number

65-0286483

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

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

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 ☐ DELETE

D
NAME PARKER, RUDOLPH
STREET ADDRESS 300 PIERCE ST S10
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE ☐ DELETE

D
NAME PARKER, MERLE SHAW
STREET ADDRESS 300 PIERCE ST S10
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

700002283027--0

-09/02/97--00161-008

****165.00 ****165.00

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I do 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: RUDOLPH PARKER

SIGNATURE: [Signature]

SIGNATURE: [Signature]

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (9/96)

Francis M. Switzer
Certified Public Accountant

Telephone (305) 663-3566
Fax (305) 665-9060

Gables Waterway Executive Center
1390 South Dixie Highway, Suite 1108
Coral Gables, Florida 33146

August 20, 1997

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

Subject: Rudolph Parker & Associates
Id: 65-0286483

Gentlemen:

Enclosed is the annual report for the above corporation and a check for \$165.

The owner of the company was incapacitated for most of 1997 with cancer surgery, kemo and radiation treatments. Under the circumstances, a great deal of administration came to a virtual halt.

If possible, please waive any potential penalties and accept the enclosed check as payment in full.

Thank you for any consideration you are able to show the taxpayer.

Very truly yours


Francis M. Switzer