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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Ka≱herie_f Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # 1. Corporation Name

May 24, 1999 8:00 am Secretary of State

05-24-1999 90006 002 ***158.75

NEVILLE & AGSOCIATES TITLE						
THE CHAIRS FI MIAMI, FL			15th Street	DO NOT WRITE IN TH	is space	
33134		33143		3. Date Incorporated or Qualifed		
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	- T	Applied For
3401	MINORCA AVENUE _	26 5150 SW	75th STREE	T 65-0293950		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	•	5 Additional Required
City & Sta		City & State 28 MI AWW,	FL	6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip 331	34 25 USA	Zip 29 33/43	Country 30 USA	This corporation owes the current year Personal Property Tax.	Intangible Yes	>
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registers		
			81 Name	regory A. NEVLLE		
			82 Street Add	Iress (P.O. Box Number is Not Acceptable)		
				50 SW 75M STREE	Γ	
			83			
			84 City		95 7	Zip Code
			MIA	<i>-M1</i> F	L 3	3/43
1. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Stati	ites, the above-named corp	poration submits this statement for the purpose	of changing	its registered
office or agent. La	registered agent, or both, in the State o am familiar with, and accept the obligati	l Florida. Such change was ons o£ Section 607.0505. F	authorized by the corporati lorida Statutes	ion's board of directors. I hereby accept the app	iointment as	; registered
IGNATURE	10/6/2	Cole NV	A Novelle	4/2	6/99	,
IGNATURE	Sign are, pregior printed name of registered agent	and title if applicable. (NO	E: Registered Agent signature require	ed when reinstating) DATE		
2.	OFFICERS AND	DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	CTORS IN 12
TLE	president "	☐ DELETE	1.1 TITLE		Chan	ge 🗌 Addition
AME	Debra Attin Neulle		1.2 NAME			
TREET ADDRESS	5150 SW 75 St.		1.3 STREET ADDRESS			
TY-ST-ZIP	MIAMI, FL 3314	7	1.4 CITY-ST-ZIP			
TLE	Vill- bree idan 1	☐ DELETE	2 1 TITLE		☐ Chan	ige 🔲 Addition
AME	Gregory A. Neville 5150 SW 75 St.		2.2 NAME			
FREET ADDRESS	C 2 2 75 5 \$		2.3 STREET ADDRESS			
TY-ST-ZIP	Minny FC 3314		2.4 CITY-ST-ZIP			
TLE	MIMM, 1 - 33/7	DELETE	3.1 TITLE		Chan	ige 🔲 Addition
AME			3.2 NAME			
TREET ADDRESS	-	·	33 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		 ,
TY-ST-ZIP			3.4. CITY-ST-ZIP			
TLE	 	☐ DELETE	4.1 DTLE		☐ Chan	ge
AME		_ ,	4.2 NAME		_	_
REET ADDRESS			4.3 STREET ADDRESS			
TY-ST-ZIP			4.4 CITY-ST-ZIP			
TLE	 	DELETE	5.1 TITLE		Chan	ge Addition
AME	}		5.2 NAME			
			5 3 STREET ADDRESS			
TREET ADDRESS	1		5.4 CITY-ST-ZIP			
ITY-ST-ZIP TLE	 	☐ DELETE	6.1 TITLE		 ☐ Chane	ge Addition
			6.2 NAME			20 LI / (2018)011
AME			6.3 STREET ADDRESS			
REET ADDRESS			l i			
TY-ST-ZIP	1		6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

SIGNATURE:

\$126/99 Daytime Phone #

CR2E034 (11/98)