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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

NICOLAS J. WATKINS, P.A.

Jan 21	1998	8:00am
Secretary of State		

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Principal Place of Business Mailing Address 901 BRICKELL KEY DR. 501 BRICKELL KEY DR. SUITE 504 SUITE 504 MIAMI FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1992 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 65-0304798 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \mathbf{Z} .. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. 👿 Yes 🔲 No Zio Country Zip Personal Property Tax due June 30. 25 30 24 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WATKINS NICOLAS J. 501 BRICKELL KEY DR. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 504 83 MIAMI FL 33131 84 City Zip Code F

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 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1,1 TITLE Change Addition TITLE WATKINS, NICOLAS J. 1.2 NAME NAME 501 BRICKELL KEY DR. SUITE 504 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP TITLE ☐ DELETE 4.1 TITLE ☐ Change ___ Addition 4, 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 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 replayer 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 a paratherment with an address.

SIGNATURE:

CR2E034

ROBINSON & WATKINS LLP

Attorneys at Law

Courvoisier Centre I, Suite 504 501 Brickell Key Drive, Mizmi, FL 33131 Telephone (305) 377-1274 Fax (305) 377-1422

January 7, 1998

Division of Corporations Annual Reports Section Post Office Box 1500 Tallahassee, Florida 32302-1500

Re: Nicolas J. Watkins, P.A.

1998 Annual Report

Dear Sir/Madam:

I enclose for filing the 1998 Annual Report of Nicolas J. Watkins, P.A., duly completed and signed, together with this firm's check in the amount of \$158.75 in payment of the filing fee and the requested certificate of status.

Thank you for your assistance.

Singerely,

Nicolas I. Watkins, P.A.

Enclosures

R&W.004