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

DENNIS J. CARY, P.A.

DOCUMENT #

SIGNATURE:



V10097

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Aug 30, 1999 8:00 am Secretary of State

08-30-1999 90005 012 ***550.00

610410 - 90005 - 12

						: 	
Principal Place	of Business	Mailing Address					
138 W PALMET		138 W PALMETTO					
BOCA RATON FL 33432 US		BOCA RATON FL US	33432		DO NOT WRITE IN THIS SPACE		
03		00			3. Date Incorporated or Qualified		
					01/29/1992		
2. Principal Pl	lace of Business	2a. Mailing Addres	ss		4. FEI Number		Applied For
21	and a second of the second	26			65-0307988		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	etc.		5. Certificate of Status Desired		5 Additional Required
City & State	e	City & State			6. Election Campaign Financing	<u> </u>	0 May Be
23		28			Trust Fund Contribution	<u> </u>	ed to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes the current	· 🗀	₩
24	25	29	30		Intangible Personal Property. 10. Name and Address of New Reg	Yes	₩ No
	9. Name and Address o	of Current Registered Agent		81 Name	10. Name and Address of New Reg	istered Agent	
CAF	RY, DENNIS J.			- Name			
	W PALMETTO PARK RD)			Street Address (P.O. Box Number is Not Acceptable)		
	CA RATON FL 33432			83			
	5// 18/1 O// 12 59 132	;					
				84 City	-	FL 85 Z	ip Code
44 Dumuna	to the provisions of sections	607 0502 and 607 1508 Florida	Statutes the ah	love-named come	oration submits this statement for the purpo	on of changing its	s registered
11. Pursuant office or	registered agent, or both, in t	the State of Florida. Such change	e was authorized	d by the corporal	tion's board of directors. I hereby accept the	e appointment as	registered
anentis	am familiar with, add accept t	the obligations of, section 607.05	505, Florida Stat	tutes.	♥ /	12/00	
agom. i	<i>ii 12</i>						
SIGNATURE .	1 lew	istard shart and title if and cable	(NOTE: Registe		ouired when reinstating)	#)/79 DATE	
SIGNATURE	Signature, typed or printed name of reg	gistered spent and title if epoilcably.			ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIREC	TORS IN 12
SIGNATURE	Signature, typed or printed name of reg OFFIC	CERE AND DIRECTORS	13.	ered Agent signature re		DATE ERS AND DIRECT	<u> </u>
SIGNATURE.	Signature, typed or printed name of reg OFFIC		13.	ered Agent signature red			<u> </u>
SIGNATURE . 12. TITLE NAME	Signature, typed or printed name of reg OFFIC D CARY, DENNIS J	CER AND DIRECTORS	13. ETE 1.1 TI 1.2 N/	ered Agent signature red			<u> </u>
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of reg OFFIC D CARY, DENNIS J 138 W PALMETTO PAI	CERP AND DIRECTORS DEL	13. ETE 1.1 TI 1.2 NA 1.3 ST	TLE AME			<u> </u>
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of reg OFFIC D CARY, DENNIS J 138 W PALMETTO PAI	CERP AND DIRECTORS DEL	13. ETE 1.1 TI 1.2 NA 1.3 ST 1.4 CI	TLE AME TREET ADDRESS TTY-ST-ZIP		Chang	ge Addition
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