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

PROFIT Jan 20 1998 8:00am LLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # V27045 (6) RICHARD E. TULLIE, P.A. Principal Place of Business Mailing Address 621 N.W. 53RD STREET 621 N.W. 53RD STREET SUITE 385 **SUITE 385** DO NOT WRITE IN 1HIS SPACE **BOCA RATON FL 33487** BOCA RATON FL 33487 3. Date Incorporated or Qualified 04/08/1992 2a. Mailing Address 2. Principal Place of Businoss 4. FET Number Applied For Not Applicable 65-0325448 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zφ **8.** This corporation owes or has paid the current year Intangible Yes 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name TULLIE, RICHARD E. E. **621 N.W. 53RD STREET, SUITE 385** 82 Street Address (P.O. Box Number is Not Acceptable) ONE PARK PLACE 83 **BOCA RATON FL 33487** 84 City de Satutes, the above-riamed corporation submits this statement for the purpose of changing its registered change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 607-0505, Florida Statutes 11. Pursuant to the provisions of office or registered agent agent. I am Jamilla willy SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OELE TE TITLE Change Addition 1.1 TITLE TULLIE, RICHARD E NAME 1.2 NAME 621 NW 53RD STREET, SUITE 385 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CHY-SY-ZIP DELETE Change Addition TITLE 2.1 THLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIF 2.4 CITY - ST - ZIP DELETE TITLE 3171111 Change Addition NAME 3.2 NAM6 STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE TITLE 4.1 THLE ☐ Change ☐ Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CDY-ST-ZIP DELETE Change TITLE 5.1 THLE Addition NAME **5.2 NAME** STREET ADDRESS 5.3 STRELL ADDRESS CITY-ST-7IP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP

14. Thereby 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 logal effect as if made under eath; that I am an officer or director of the corporation or the report of trusted in powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

I. laa

Block 12 or Block 13 if changed or on

**FILED**