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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # V42148

1. Corporation Name

RICHARD A. KUPFER, P.A.

Principal Place of Business

SUITE 910

1655 PALM BEACH LAKES BLVD.

W PALM BOH: FL 93401-

Mailing Address

1655-PALM-BEACH-LAKES-BLVD. SUITE-810-

W PALM BCH. FL 33401

**FILED** Feb 23, 1999 8:00 am

Secretary of State

02-23-1999 90024 006 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

				06/05/1992		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Apr	olied For
1-572	5 Corporate Way	26 5725 COFE	COTATE WAY	65-0339576	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	
22 SUL	Te 106	27 SUITE 106		3. Contracts of Editor Desired	Fee Re	quired
City & State		City & State	1	- 6. Election Campaign Financing	<b>~~ -\$5.00</b>	
23 West	rain Keach, FL.	28 WEST TAIM GE	ach, HC.	Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In		Пи.
24 <u>334</u> 0	0'/ 25 USA	29 33407 30	0.05H	Personal Property Tax.		□No
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name 1/ 00 ( ) ( ) ( )						
KUPFER, RICHARD A						
1055 DALM PEACL LAVES DIVID. CTC 940. 82 Street Address (P.O. Box Number is Not Acceptable)						
WEST PALM BCH FL 33401						
WES	I PALM BUTI PL 33401	2150 106		ſ		
			84 City	0.0	85 Zip C	
			West	TYAIM BEACH, FL		407
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 Kick BODS (Richard Lupter, Pres.) 1-5-99						
System Medical properties are an of the state of the stat						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PSTD	☐ DELETE	1.1 TITLE	PSTD 0 4010	Change	Addition
NAME	KUPFER, RICHARD A.		1.2 NAME	Kupfer Richard H.	e.106	
STREET ADDRESS	1655 PALM BEACH LAKES BLVI	) STE 810	1.3 STREET ADDRESS	5725 Corporate W17)3.	_	ì
CITY-ST-ZIP	W PALM BCH. FL		1.4 CITY-ST-ZIP	N. PAIN 13C1., TL. 3340	7	
TITLE		☐ DELETE	2.1 TITLE		☐ Change	☐ Addition (
NAME			2.2 NAME			1
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE	The second secon	☐ Change	☐ Addition (
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			ļ
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	•	☐ Change	☐ Addition
NAME			4. 2 NAME	•		1
STREET ADDRESS			4.3 STREET ADDRESS -	e e		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			·
STREET ADDRESS			53 STREET ADDRESS			)
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			Ì
STREET ADDRESS			6.3 STREET ADDRESS			
			<b>1</b>	•		

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 of 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE,

Kupfer 1-5-99 (561) 684-8600