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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V54754 1. Corporation Name

GEORGE REBHOLZ AND ASSOCIATES, INC.

Principal Place	e of Business	Mailing Address				· •:0:: 4:0:: E:D!!	91417 BIBIT 1881	
11939 NORTH LAKE DRIVE 11939 NORTH LAKE DRIVE BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436 US					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 07/28/1992			
2. Principal Pl	ace of Business -	2a. Mailing Address			4. FEI Number	ļ -	pplied For	
21		26			65-0350341		lot Applicable	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	•	Additional tequired	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country	Zip Co	ountry		8. This corporation owes the current year			
24 25 29 30				Personal Property Tax.				
	9. Name and Address of Current	Registered Agent	<u> </u>	т	10. Name and Address of New Registers	d Agent		
	1017 050005 5		81	Name				
REBHOLZ, GEORGE E 11939 NORTH LAKE DRIVE			82	Street Add	Address (P.O. Box Number is Not Acceptable)			
BOY	NTON BEACH FL 33436	•	83					
•			84	City		85 Zip	Code	
					- ties authorite this statement for the numero	of changing if	e registered	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florida. Such change was authorize	ed by	the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as r	egistered	
SIGNATURE					rd when reinstating) DATE			
	Signature, typed or printed name of registered agent OFFICERS ANI			nt signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12	
TITLE	D OFFICERS AND		TITLE		ADDITIONS/CHANGES TO OF FIGURE	☐ Change		
NAME	REBHOLZ, GEORGE E		NAME				_	
STREET ADDRESS	11939 NORTH LAKE DRIVE			TADORESS				
	BOYNTON BEACH FL	1	CITY-S	1				
CITY-ST-ZIP TITLE	D D		TITLE			☐ Change	☐ Addition	
NAME	REBHOLZ, JOANNE O		NAME				1	
STREET ADDRESS	11939 NORTH LAKE DRIVE			TADDRESS				
	BOYNTON BEACH FL		CfTY-S					
CITY-ST-ZIP TITLE	BOTHTON BEACH TE		TITLE	-1 411		Change	☐ Addition	
NAME	Like they are to the		NAME			1		
STREET ADDRESS	Afrika to			TADDRESS			20, 1 134	
CITY-ST-ZIP	38.75 EE - 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		CITY-S					
TITLE	·		TITLE		1 1 1 1 1 1 1 1 1 1 1 1	☐ Change	. Addition	
NAME .		_	NAME					
STREET ADDRESS	, •			TADORESS				
	4		CITY-S	. 1	•			
CITY-ST-ZIP TITLE			TITLE	. 41		☐ Change	Addition	
			NAME					
NAME	•			TADDRESS			i	
STREET ADDRESS	1 5	1	CITY-S		•	•	ļ	
CITY-ST-ZIP TITLE	ARTINIA.		TITLE			☐ Change	Addition	
			NAME			_ •	_	
NAME				T ADDRESS				

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 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 of an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Jan 22, 1999 8:00am

Secretary of State

I TRANK BINDRI DESINE DIRECTORIS AND ANTER BIRECTORIS AND ANTER CARREST AND ANTER CA

01-22-1999 90035 020 ***150.00