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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 06 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 692635

(6)

Mailing Address

KOCH, ZELKO, ROTH, REISS, BELLANTONI, SCHINDER & ROSENBERG, P.A.

| 4700 Sheridan Street BLDG N HOLLYWOOD FL 33021 | | 4700 SHERIDAN STREET BLDG N HOLLYWOOD FL 33021-3416 | | | | | | | |
|--|---|---|---------------------------|-------------------------------------|---|--|--|--|--|
| | | | | | 3. Date Inco 07/01/1 | prporated or Qualified 981 | 3a. Date of Las 04/16/1996 | | |
| 2. Principal P | face of Business | 2a. Mailing Address | | | 4. FEI Numb | ber | ' | Applied For | |
| 21 | | 26 | | | 59-210 |)1505 | | Not Applicable | |
| Suite, Apt #, etc. | | Suite, Apt #, etc | | | 5. Certificati | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | |
| City & State 23 | | City & State | h1 | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip | Country | Zip | Zip Country | | B. This corp | B. This corporation has liability for intangible tax under s. 199,032, | | | |
| 24 | 25 | 29 | 30 | | Florida Statutes | | | | |
| | 9. Name and Address of Curren | t Registered Agent | | | | d Address of New Re | gistered Agent | | |
| | H, JEFFREY B | | ľ | 11 Name | l | | | | |
| | SHERIDAN STREET | | 82 Street Addr | | Address (P.O. Box N | umber is Not Acceptab | ie) | | |
| HOL | LYWOOD FL 33021 | | - | | | | | | |
| | | | ľ | 13 | | | | | |
| | | | Ē | 4 City | | | FL 85 Z | ip Code | |
| 11 Porsuant | to the provisions of Sections 607,050 | 2 auri 607 1508. Florida Statute | as the ahr | wo-namor | d corporation submits | this statement for the n | | n ite registered | |
| office or r | eg stored agent, or both, in the State ini familiar with, and accept the oblig | of Florida. Such change was a | authorized | by the cor | rporation's board of di | rectors. Fhereby accep | of the appointment | as registered | |
| SIGNATURE | Signature, typed or printed haron of registered ago | ns and trie if applicable (NOT) | . Registered | Agent signatur | e required when reinstating) | | DATE | | |
| 12. | OFFICE'RS AN | | 13. | - | ADDITION | S/CHANGES TO OFFIC | | ORS IN 12 | |
| TITLE | D DELETE | | 1.1 TITLE | | | | ☐ Chang | | |
| NAME | JACK N. ROSENBERG | | 1.2 NAM | E | | | | | |
| STREET ADDRESS | 4700 SHERIDAN ST | | 1.3 STR | EET ADDRESS | | | | | |
| CHY-ST-ZIF | HOLLYWOOD FL | | 1.4 CITY - ST - ZIP | | | | | | |
| TITLE | VD DELETE | | 2.1 TITL | E | | | ☐ Chang | e Addition | |
| NAME | ZELKO, ROBERT A | | 2.2 NAM | KE. | | | | | |
| STREET ADORESS | 4700 SHERIDAN ST | | 2.3 STR | EET ADDRESS | | | | | |
| CUT-ST-ZIP | HOLLYWOOD, FL 00000 | | 2. 4 CITY - ST - ZIP | | 1 | | | | |
| THLE | PD DELETE | | 3.1 1111 | E | | | ☐ Chang | e Addition | |
| NAME | • | | 3.2 NAN | Æ | | | | | |
| STREET ADDRESS | 4700 SHERIDAN ST | | 3.3 STREET ADDRESS | | | | | | |
| CHY-ST ZIP | HOLLYWOOD, FL 0 | | 3.4. CITY - \$1 - ZIP | | | | | | |
| TOTALE | D DELETE | | 4.1 TITE | E | | | ☐ Chang | e 🔲 Addition | |
| NAME | reiss, A. Gerald | | | MΕ | | | | | |
| STREET ADDRESS | 4700 SHERIDAN ST | | 4.3 STR | EET ADDRESS | | | | | |
| CITY - ST- ZIP | HOLLYWOOD FL | | 4.4 CITY | · ST-ZIP | | | | | |
| TITLE | D DELETE | | 5.1 TITL | E | | | ☐ Chang | e 🔲 Addition | |
| NAME | BELLANTONI, DONALD, F | | 5.2 NAN | AME | | | | | |
| STREET ADDRESS | 4700 SHERIDAN ST | | 5.3 STR | eet address | | | | | |
| CITY-S1-201 | HOLLYWOOD FL | | 5.4 CITY | -ST-ZIP | | | | | |
| TITLE | D | DELETE 6. | | E | | ☐ Ch | | e 🔲 Addition | |
| NAME | SCHINDER, BERNARD J |) J | | IE . | | | | | |
| STREET ADDRESS | 4700 SHERIDAN ST | | 6.3 STR | EET ADDRESS | | | | | |
| CITY - ST - ZiF | HOLLYWOOD FL | | | -ST-ZIP | | | | | |
| informatic Lani an o | by certify that the information supplie or indicated on this annual report or s flicer or director of the corporation or in Block 12 or Block 13 if changed, o | supplemental annual report is to the receiver or trustee empow | rue and ac ereal lo ex | xemption curate an ecute this | stated in Section 119. d that my signature sh report as required by | 07(3)(i), Florida Statute nall have the same lega Chapter 607, Florida S | I further certify the second se | iat the under oath; that ly name | |

FEB 2 0 1997