

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

FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000001832 (2)

1. Corporation Name

STATON OPERATIONS, INC.



Principal Place of Business

Mailing Address

2665 S. BAYSHORE DR. SUITE 900  
MIAMI FL 33133

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MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/11/1996

4. FEI Number

65-0656440

Applied For

Not Applicable

6. Certificate of Status Desired ~~XXXX~~

\$8.75 Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 2665 S Bayshore Drive

Suite, Apt. #, etc.

22 Suite 703

City & State

23 Miami, FL

Zip

24 33133-5401

Country

25 USA

2a. Mailing Address

26 2665 S Bayshore Drive

Suite, Apt. #, etc.

27 Suite 703

City & State

28 Miami, FL

Zip

29 33133-5401

Country

30 USA

9. Name and Address of Current Registered Agent

RICHARDS, TIMOTHY D ESO  
2665 S. BAYSHORE DR, SUITE 900  
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

World Corporate Services, Inc.

82 Street Address (P.O. Box Number is Not Acceptable)

2665 S Bayshore Drive

83

Suite 703

84 City

Miami

FL

85 Zip Code

33133-5401

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

*Timothy D. Richards*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/8/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME STATON, ALBERT H JR  
STREET ADDRESS 2665 S. BAYSHORE DR, SUITE 900  
CITY-ST-ZIP MIAMI FL 33133

TITLE VTD ☒ DELETE

NAME STATON, MARY JANE  
STREET ADDRESS 2665 S. BAYSHORE DR, SUITE 900  
CITY-ST-ZIP MIAMI FL 33133

TITLE S ☒ DELETE

NAME RICHARDS, TIMOTHY D  
STREET ADDRESS 2665 S. BAYSHORE DR, SUITE 900  
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P ☐ Change ☒ Addition

1.2 NAME Albert H. Staton, Jr.  
1.3 STREET ADDRESS 2665 S Bayshore Drive STE 703  
1.4 CITY-ST-ZIP Miami, FL 33133-5401

2.1 TITLE D/V/T ☐ Change ☒ Addition

2.2 NAME Mary Jane Staton  
2.3 STREET ADDRESS 2665 S Bayshore Drive STE 703  
2.4 CITY-ST-ZIP Miami, FL 33133-5401

3.1 TITLE A S ☐ Change ☒ Addition

3.2 NAME Timothy D. Richards, Esq.  
3.3 STREET ADDRESS 2665 S Bayshore Drive, STE 703  
3.4 CITY-ST-ZIP Miami, FL 33133-5401

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 on an attachment with an address.

CR2E034 (10/97)