

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # M31826
1. Corporation Name
PMC INVESTMENT CORPORATION

(4)

FILED
98 APR 23 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

4000 HOLLYWOOD BOULEVARD
SUITE 435-SOUTH
HOLLYWOOD FL 33021-6754
US

Mailing Address

4000 HOLLYWOOD BOULEVARD
SUITE 435-SOUTH
HOLLYWOOD FL 33021-6754
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/09/1986

4. FEI Number

59-2671765

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

ROSEMORE, FREDRIC D
4000 HOLLYWOOD BLVD.
SUITE 435-S
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

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

1200 S. Pine Island Rd.

83

84 City

Plantation

FL

85 Zip Code

33324

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.

MICHAEL E. JONES

ASSISTANT SECRETARY

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME IMBER, BARRY A
STREET ADDRESS 16455 W DIXIE HWY
CITY-ST-ZIP NORTH MIAMI BEACH FL

TITLE D
NAME ROSEMORE, FREDRIC M.
STREET ADDRESS 4000 HOLLYWOOD BLVD., STE. 435-S
CITY-ST-ZIP HOLLYWOOD FL

TITLE DS
NAME ROSEMORE, LANCE B.
STREET ADDRESS 4000 HOLLYWOOD BLVD., STE 435-S
CITY-ST-ZIP HOLLYWOOD FL

TITLE DPT
NAME ROSEMORE, ANDREW
STREET ADDRESS 4000 HOLLYWOOD BLVD., STE. 435-S
CITY-ST-ZIP HOLLYWOOD FL

TITLE D
NAME DIAMOND, ROBERT
STREET ADDRESS 18301 BISCAYNE BLVD 2ND FL
CITY-ST-ZIP N MIAMI BCH FL

TITLE D
NAME GREENBERG, MARTHA R.
STREET ADDRESS UNDERWOOD RD AT 43 N HWY
CITY-ST-ZIP RUSSELLVILLE AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME 4000002503404-- 8
1.3 STREET ADDRESS -04/28/98--01087--016
1.4 CITY-ST-ZIP ****150.00 ****150.00

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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.

SIGNATURE:

[Signature]

CP2E034 (10/97)