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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P92000002217 (7)

SOMERVILLE HOUSE INC.

SIGNATURE:

Principal Piace of Business Mailing Address C/O MARVIN KURZBAN. ESO C/O MARVIN KURZBAN. ESQ. 2650 SW 27TH AVE., 2ND FLOOR 2650 SW 27TH AVE., 2ND FLOOR MIAMI FL 33133-3003 MIAMI FL 33133 3. Date Incorporated or Qualified 3a. Date of Last Report 10/27/1992 04/08/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0483188 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zir Country Zip Country 8. This corporation has liability for intangible tax upder s. 199.032, Yes Yo 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name KURZBAN, MARVIN 2650 SW 27TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) 2ND FLOOR 83 **MIAMI FL 33133** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 Signatine, typed or printed name of registered agent and tile if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 (96/6) DELETE Change Addition 1.1 TITLE TOTLE SOMERVILLE, JANE 1.2 NAME NAME 3080 YONGE ST. STE. 5000 STREET ADDRESS 1.3 STREET ADDRESS TORONTO, ONTARIO CA CITY - ST - 7IP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE CASPARI, DAVID NAME 22 NAME 3080 YONGE ST. STE.5000 STREET ADDRESS 2.3 STREET ADDRESS TORONTO, ONTARIO CA CHY-ST-ZIP 2.4 CiTY-ST-ZiP DELETE Change Addition TITLE 3.1 TITLE NAM 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS C017 - S1 - ZIP 3.4. CITY-ST-ZIP □ DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change \_\_\_ Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do 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 tho 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 3 if chapted, or on an attachment with an address.

**FILED** Mar 06 1997 8:00am Secretary of State

