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

Mailing Address

P.O. BOX 1390

1800 NORTH DIXIE HIGHWAY

BOCA RATON FL 33432-1845

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

BOCA RATON FL 33432

SIGNATURE:

P.O. BOX 1390

1800 NORTH DIXIE HIGHWAY



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1997 8:00am

Secretary of State

561.295-4433

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000011606 (0)

DOWNTOWN BOCA RATON CHAMBER OF COMMERCE, INC.

3. Date Incorporated or Qualified 3a. Date of Last Report 12/11/1992 05/01/1996 4. FEI Number Principal Place of Business 2a. Mailing Address Applied For 65-0495615 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 7_{in} Country Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name ARTS, M J 1800 NORTH DIXIE HIGHWAY Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33432** 83 84 Zip Code 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, typed or printed name of registered agent and tice if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)OFFICERS AND DIRECTORS 12. 13. SD DELETE 1.1 TITLE Change Addition TITLE M.J. MIKE ARTS 12 NAME NAME 1800 NORTH DIXIE HIGHWAY 1.3 STREET ADDRESS STREET ADDRESS BOCA RATON FL 33432 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE SCHMIDT, SANDRA NAME 22 NAME 2499 GLADES ROAD #312 23 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY -ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE RICHARD MURDOCH NAME 32 NAME 980 N FEDERAL HWY. #410 **3.3 STREET ADORESS** STREET ADDRESS **BOCA RATON FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition Addition 4.1 TITLE TITLE WILLIAM HAGER NAME 4 2 NAME 750 PARK OF COMMERCE DR STREET ADDRESS 4.3 STREET ADDRESS **BOCA RATON FL** 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change **Addition** TITLE 5.1 TITLE AL TRAVASOS JAMES BARR 5.2 NAME NAME 2255 GLADES AD, M420A 1700 FLORIDA MANGO ROAD 5.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 5.4 CITY-ST-ZIP C(1 Y - S1 - 7)P ☐ DELETE 6.1 TITLE Change : Addition TIFLE VECCIA, JOSEPH NAVE 6.2 NAME 1100 NORTH FEDERAL HIGHWAY **6.3 STREET ADDRESS** STREET ADDRESS **BOCA RATON FL 33432** 6.4 CITY-ST-ZIP 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 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.