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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

P95000000038 (6)

THE GEORGE PONTIGO CORPORATION

Maring Address Principal Place of Business 2790 NE 9TH ST 2790 NE 9TH ST POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 3. Date Incorporated or Qualified 3a. Date of Last Report 12/30/1994 07/20/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-055090 Not Applicable 26 21 \$8.75 Additional Suite, Ant. #, etc Suite. Apt. #, etc 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zio Country Florida Statutes Yes 🔲 No 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name JOHN O SUTTON PA Street Address (P.O. Box Number is Not Acceptable) 82 2655 LEJEUNE RD PH-II 83 CORAL GABLES FL 33134 85 Zip Code 84 City 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. Thereby accept the appointment as registered agent. Lam; familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE fault. Registered April suprature regions Lybics remitating. Signature typed or ported her eloting tensors agent and the it optimate ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Add-t-on ["] DELETE 1.1 Dr. € TITLE PONTIGO, GEORGE 1.2 NAME NAME 2790 NE 9TH ST 1.3 STREET ADORESS STREET ADDRESS POMPANO BEACH FL 33062 1.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2 1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CiTY ST-ZIP CITY - ST - ZIE Change Addition DELETE 3 1 1ILE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CiTY - ST - ZiP CITY - ST - ZIP Change ne-fibbA [DELETE 4 1101E TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - ST-ZIP CITY -ST - ZIP ☐ Change Addition [] DELETE 5 1 TiTLE TITLE 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CH∀ | S1-ZP CITY - ST - ZIP Change ■ Addition DELETE 6 1 N.E TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS

64 CITY ST-ZIP

supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further

supplied with this limits is voluntary raminists and does not qualify for the examplion states in does not be don't in the additional this annual report is frue and accurate and that my signature shall have the same legal effect as if made under the carboration or the receiver or trusted on powered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

14. I do hereby certify that the infor

certify that the information indica oath; that I am an officer or dired appears in Block 12 or Block 13

CHTY-ST-ZIP

Ab/10/46 (302) 8849218

CR2E034 (12/95)