

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G39009**

(7)

1. Corporation Name

PHILOS, INC.



Principal Place of Business

**1428 BRICKELL AVE. #105
MIAMI FL 33131**

Mailing Address

**1428 BRICKELL AVE. #105
MIAMI FL 33131**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

**HALPRYN ERNEST M
1428 BRICKELL AVE STE 105
MIAMI FL 33131**

81 Name

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

83

84 City

FL 85 Zip Code

3. Date Incorporated or Organized

04/21/1983

3a. Date of Last Report

03/16/1995

4. FEI Number

59-2544517

Applied For
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.04(2) and 607.15(9), 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 607.04(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Officer or Director

Date

12. OFFICERS AND DIRECTORS

11	12	13
TITLE	STD	☐ DELETE
NAME	LABIANCA, PHILIP	
STREET ADDRESS	1428 BRICKELL AVE. #105	
CITY-STATE-ZIP	MIAMI FL	
TITLE	AS	☐ DELETE
NAME	WEISBERG, ALAN JAY	
STREET ADDRESS	1428 BRICKELL AVE. #105	
CITY-STATE-ZIP	MIAMI FL	
TITLE	PD	☐ DELETE
NAME	HALPRYN, ERNEST M.	
STREET ADDRESS	1428 BRICKELL AVE, STE 105	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VPD	☐ DELETE
NAME	DE VECCHI, JOHN	
STREET ADDRESS	1428 BRICKELL AVE, STE 105	
CITY-STATE-ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13	14
11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	☐ Change ☐ Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	☐ Change ☐ Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	☐ Change ☐ Addition
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	☐ Change ☐ Addition
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	☐ Change ☐ Addition
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do not qualify for the exemption stated in Section 119.07(3)(k), 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 its predecessor or both, and that my name appears in Book 12 or Book 13 of the records of the corporation or its predecessor or both, and that my name appears in Book 12 or Book 13 of the records of the corporation or its predecessor or both.

SIGNATURE:

Ernest M. Halpryn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ERNEST M. HALPRYN
PRESIDENT

3/19/96 **305 371-412**
Date Printed

CR2E034 (12/95)