

FILED

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

Jan 29 1997 8:00am
Secretary of State

DOCUMENT # F94000006138 (1)

1. Corporation Name
CONCEPT XXI, INC.

Principal Place of Business
3681 S. GREEN RD. #306
CLEVELAND OH 44122

Mailing Address
3681 S. GREEN RD. #306
CLEVELAND OH 44122-5716

3. Date Incorporated or Qualified 12/01/1994	3a. Date of Last Report 03/21/1996
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4. FEI Number		Applied For
34-1297063		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

9. Name and Address of Current Registered Agent

WOZNIAK, JOHN A
22213 W. NEWBERRY RD.
NEWBERRY FL 32669

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	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 _____

\$16.196 - typed or electronic name of registered agent and title applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CP	<input type="checkbox"/> DELETE
NAME	KAPLAN, IRVING L	
STREET ADDRESS	3881 S. GREEN RD. #308	
CITY - ST - ZIP	CLEVELAND OH 44122	

11 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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NAME	KAPLAN, IRVING L
STREET ADDRESS	3681 S. GREEN RD. #306
CITY - ST - ZIP	CLEVELAND OH 44122

12 NAME	
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STREET ADDRESS 3681 S. GREEN RD. #308
CITY - ST - ZIP CLEVELAND OH 44122

1.0 STREET ADDRESS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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FILE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

31 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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62 NAME	
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63 STREET ADDRESS

U.S. STREET ADDRESS	
CITY, STATE, 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, changed, or on an attachment with an address.

SIGNATURE: Spring Kaplan SPRING KAPLAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/97 246 831 2621
Date Date/Phone #

CR2E034 (9/96)