## 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 # F9600002843 (8)

PREFERRED BUILDING, INC.

	Principal Place of Business	Mailing Address	
	8900 E 2ND ST SOOTTSDALE AZ 85251	6900 E 2ND ST SCOTTSDALE AZ 85251-5306	
:			

## FILED May 06 1997 8:00am Secretary of State



						3. Date Incorporated or Qu	ualified 3a.	Date of Last I	Report		
		9 / APP-10 A.				06/06/1996		N/A			
	lace of Business	<del> </del>	2a. Mailing Address			4. FEI Number	7 13,90	2 2/ A	pplied For		
21		and the state of t	26			APPLIED FOR 9	3-14010		ot Applicable		
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Des	ired 🔲		Additional		
22		27						Fee H	equired		
City & Stat	0	City & State			6. Election Campaign Financing \$5.00 May Be						
23		28]				Trust Fund Contribution					
Zip	Country	Zip	untry		8. This corporation has hat			s. 199.032,			
24 25 29 3 9, Name and Address of Current Registered Agent						Florida Statutes Yes No					
	··· <del></del>	it Hedistered Adeur		81	Name	<u>`</u>					
	CORPORATION SYSTEM				Hame	<i>;</i>					
1200 SOUTH PINE ISLAND ROAD					82 Street Address (P.O. Box Number is Not Acceptable)						
j Plai	NTATION FL 33324										
				83							
				84	City		· · · · · · · · · · · · · · · · · · ·	. 85 Zip	Code		
							F	<b>'L</b> .			
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. La	m familiar with, and accept the oblig	ations of, Section 607.0	0505, Florida Sta	itutes	7 tile corp.c 8.	PRAILORS DOALD OF OFFECTORS. THE RE	by accept the a	эрропинен аз	s registered		
SIGNATURE											
	Signature, typed or printed name of registered ag-				nt signature re	equired when re-installing)	DATE				
12.		D DIRECTORS	18.			ADDITIONS/CHANGES T	O OFFICERS A				
TITLE	DC	☐ DEI			ł	DC AND DP		Change	Addition		
NAME	KAULIUS, EUGENE		1.21	IAME							
STREET ADDRESS	6900 E 2ND ST		1.8.9	STREET	ADDRESS						
CITY-ST-ZIP	SCOTTSDALE AZ 85251			CHY-S	1 - 7 P						
TITLE				ITLE				L Change	Addition		
NAME ORENSTEIN, FRANK		•	2.2 h	2.2 NAME							
STREET ADDRESS	6900 E 2ND ST		2.3 9	STREET	ADDRESS						
CITY-ST-ZIP	ST-ZIP SCOTTSDALE AZ 85251			CITY-S	ST - ZIP		···				
TITLE	V\$	DEI	LETE 31 T	ITLE		CAROL RICHAR 6900 E 2 19 S	CA5	☐ Change	✓ Addition		
NAME	i tillionii otalicoott		3.2 1	3.8 NAME		CAROL					
STREET ADDRESS	6900 E 2ND ST		3.8 9	STREET	ADDRESS	6900 € 00 =	· .	- , ,- ,			
CITY-ST-ZIP	SCOTTSDALE AZ 85251		3.4.	CITY-S	S1 - ZIP	SCOTTSOALE,	9280	23/			
TITLE	S	☐ DEI	LETE 4.11	ITLE		•		☐ Change	Addition		
NAME	POER, PAUL		4.21	NAME							
STREET ADDRESS	6900 E 2ND ST		4.8 9	STREET	ADDRESS						
CITY-ST-ZIP	SCOTTSDALE AZ 85251			HY-\$							
TITLE	S	DELETE 5				5	- 41	Change	Addition		
NAME	GREENE, MORLEY 52N		IMA	ADDRESS 6900 E. 2NL ST. ST-ZIP SCOTTS DALE, MZ 8523							
STREET ADDRESS				5.3 STREET ADDRESS		6900 E. ZNOS	77.				
CITY-ST-ZIP				5.4 CHY-ST-ZIP		TCOTTSDALE AZ	8523	5/			
TITLE		☐ DEI	LETE 6.1 1	ITLE		, , , , , , , , , , , , , , , , , , , ,		☐ Change	Addition		
NAME			6.21	NAME							
STREET ADDRESS			6.8 9	STREET	ADDRESS						
CITY-ST-ZIP				CITY-S							

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 17 if charged, if on an attachment with an address.