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

FILED
97 JUN 27 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **110733** **(3)**

1. Corporation Name
BISCAYNE KENNEL CLUB INC

Principal Place of Business	Mailing Address
320 N.W. 115 ST. MIAMI SHORES FL 33168	320 N.W. 115 ST. MIAMI SHORES FL 33168-3322

2. Principal Place of Business 21 1915-A Hollywood Blvd	2a. Mailing Address 26 P O Box 220650
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Hollywood, FL 33020	City & State 28 Hollywood,FL
Zip / Country 24 / 25	Zip / Country 29 33022-0650 / 30 USa

3. Date Incorporated or Qualified 07/10/1926	3a. Date of Last Report 04/15/1996
4. FEI Number 59-0165290	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	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PADRON, OSCAR J. 320 NORTHWEST 115TH STREET MIAMI SHORES FL 33168	81 Name: Spitzer, Ellen W. 82 Street Address (P.O. Box Number is Not Acceptable): 1915 A Hollywood Blvd. 83 84 City: Hollywood FL 85 Zip Code: 33020

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SPITZER, ELLEN W. 320 N.W. 115 ST. MIAMI SHORES FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P D Spitzer, Ellen W. P O Box 220650 na Hollywood, FL 33022-0650 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD MCDONNELL, ELLEN W. 320 N.W. 115 ST. MIAMI SHORES FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	000002227270--2 -07/01/97--01008--012 ****165.00 ****165.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS WEST MARILYN A. 75 E. PARKWAY N. MEMPHIS TN	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	VS West Marilyn A P O Box 220650 na Hollywood, FL 33022-0650 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT PADRON, OSCAR J. 320 N.W. 115 ST. MIAMI SHORES FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition 6-30-97
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SPITZER, KARL A. 320 NW 115TH STREET MIAMI SHORES FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D Spitzer, Karl A. P O Box 220650 na Hollywood, FL 33022-0650 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KNIGHT, JOHN ROBERT 320 N.W. 115 ST. MIAMI SHORES FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D Knight, John Robert na P O Box 220650, Hollywood, Fl 33022-0650 ☒ Change ☐ Addition

CR2E034 (9/96)

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.

SIGNATURE _____ DATE _____