

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 14 1997 8:00am

Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 162396 (6)

1. Corporation Name  
EDWIN M. GREEN, INC.

Principal Place of Business

775 N W 21ST ST  
MIAMI FL 33127

Mailing Address

775 N W 21ST ST  
MIAMI FL 33127-4623

3. Date incorporated or Qualified

09/01/1950

3a. Date of Last Report

01/30/1996

4. FEI Number

59-0620346

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

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREEN, EDWIN M, JR  
775 NW 21 ST  
MIAMI FL 33127

81 Name

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

83

84 City

FL

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

AST

☐ DELETE

1.1 TITLE

☐ Change

☐ Addition

NAME

TRIPPE, JOHN N.

1.2 NAME

STREET ADDRESS

6700 SW 128 PLACE

1.3 STREET ADDRESS

CITY-STATE-ZIP

MIAMI FL

1.4 CITY-STATE-ZIP

TITLE

PD

☐ DELETE

2.1 TITLE

☐ Change

☐ Addition

NAME

GREEN, EDWIN M. JR.

2.2 NAME

STREET ADDRESS

7910 SW 53RD AVE

2.3 STREET ADDRESS

CITY-STATE-ZIP

MIAMI FL

2.4 CITY-STATE-ZIP

TITLE

AS

☐ DELETE

3.1 TITLE

☐ Change

☐ Addition

NAME

BOGUE, CATHERINE

3.2 NAME

STREET ADDRESS

2101 BRICKELL AVE

3.3 STREET ADDRESS

CITY-STATE-ZIP

MIAMI FL

3.4 CITY-STATE-ZIP

TITLE

☐ DELETE

4.1 TITLE

☐ Change

☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY-STATE-ZIP

4.4 CITY-STATE-ZIP

TITLE

☐ DELETE

5.1 TITLE

☐ Change

☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-STATE-ZIP

5.4 CITY-STATE-ZIP

TITLE

☐ DELETE

6.1 TITLE

☐ Change

☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-STATE-ZIP

6.4 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 if changed, or as an attachment with an address.

CR2E034 (9/96)