

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 372455 (6)

1. Corporation Name

FLORIDA TROPICAL BUILDERS INCORPORATED

Principal Place of Business

16485 COLLINS AVENUE
APT 2331
MIAMI BEACH FL 33160

Mailing Address

16485 COLLINS AVENUE
APT 2331
MIAMI BEACH FL 33160



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

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/06/1970

3a. Date of Last Report

04/11/1995

4. FEI Number

59-1361237

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

SILVERMAN, MARC
9337 N.W. 10TH ST.
PLANTATION FL 33322

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 607.1506, 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 607.0504, Florida Statutes.

SIGNATURE

Signature, typed or printed name of agent, if not applicable

(Typed) Registered Agent's signature and other identifying

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SILVERMAN, MURIEL
STREET ADDRESS 16485 COLLINS AVE #2331
CITY-ST-ZIP NO. MIAMI BEACH FL

TITLE SD
NAME OKRENT, ELLYN
STREET ADDRESS 4921 N.W. 72 TERR.
CITY-ST-ZIP LAUDERHILL FL

TITLE DT
NAME SILVERMAN, MARC
STREET ADDRESS 4921 N.W. 72 TERRACE
CITY-ST-ZIP LAUDERHILL FL

TITLE V
NAME OKRENT, STEVEN
STREET ADDRESS 4921 N.W. 72 TERR.
CITY-ST-ZIP LAUDERHILL FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

2. TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

3. TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

4. TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

5. TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

6. TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does 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 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:

Marc Silverman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 305-947-3652
Date Filing Fee

CR2E034 (12/95)