

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

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May 09 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 # 439059 (7)
1. Corporation Name
PRUDENTIAL INDUSTRIES CORPORATION

Principal Place of Business
8231 PALM AIRE DR. S.
BLDG. 35 T
POMPAHO BEACH FL. 33069

Mailing Address
4352 JAMES ESTATE LANE
BLDG. 35 T
LAKE WORTH FL 33467-8626
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		10/30/1973		06/27/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 4352 JAMES ESTATE LANE		27 4352 JAMES ESTATE LN.		59-1492030		Not Applicable	
23 City & State		28 City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 LAKE WORTH, FLORIDA		28 LAKE WORTH, FLORIDA		☐		☐	
24 Zip		25 Country		6. Election Campaign Financing		5.00 May Be Added to Fees	
24 33467		25 U.S.A.		Trust Fund Contribution		☐	
29 Zip		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		☐ Yes ☒ No	
29 33467		30 U.S.A.					

9. Name and Address of Current Registered Agent

VINER, MELVIN A
4352 JAMES ESTATE LANE
BLDG. 35-T
LAKE WORTH FL 33467

10. Name and Address of New Registered Agent

B1	Name
B2	Street Address (P.O. Box Number is Not Acceptable)
B3	
B4	City
B5	Zip Code

FL

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

Melvin A. Viner MELVIN A. VINER

4/25/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	S	☒ DELETE		1.1 TITLE	V.P.-S	☒ Change	☐ Addition
NAME	VINER, SELMA			1.2 NAME	Viner, Selma		
STREET ADDRESS	3231 PALM AIRE DR SOUTH			1.3 STREET ADDRESS	4352 JAMES ESTATE LANE		
CITY-ST-ZIP	POMPAHO BEACH, FL 00000			1.4 CITY-ST-ZIP	LAKE WORTH, FL. 33467-8626		
TITLE	V	☒ DELETE		2.1 TITLE	delete	☒ Change	☐ Addition
NAME	VINER CLIFFORD C/O AVM			2.2 NAME			
STREET ADDRESS	250 AUSTRALIAN AVE SO STE 600			2.3 STREET ADDRESS			
CITY-ST-ZIP	W PALM BEACH FL			2.4 CITY-ST-ZIP			
TITLE	PT	☐ DELETE		3.1 TITLE	Address	☒ Change	☐ Addition
NAME	VINER, MELVIN A			3.2 NAME	Viner, Melvin A.		
STREET ADDRESS	3231 PALM AIRE DR SOUTH			3.3 STREET ADDRESS	4352 JAMES ESTATE LANE		
CITY-ST-ZIP	POMPAHO BEACH, FL 00000			3.4 CITY-ST-ZIP	LAKE WORTH, FL. 33467-8626		
TITLE	D	☐ DELETE		4.1 TITLE		☐ Change	☐ Addition
NAME	ELIZABETH CAMP			4.2 NAME			
STREET ADDRESS	6 HERRICK MY			4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE		☐ Change	☐ Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE		☐ Change	☐ Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-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 on an attachment with an address.

SIGNATURE:

Melvin A. Viner MELVIN A. VINER 4/25/97

CR2E034 (9/96)