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FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 528926 (9)
1. Corporation Name
P B R, INC.

Principal Place of Business
10700 NO. KENDALL DR., SUITE 300
MIAMI FL 33176

Mailing Address
10700 NO. KENDALL DR., SUITE 300
MIAMI FL 33176

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/15/1977

4. FEI Number
59-1804735
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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business
21 5143 S. UNIVERSITY DRIVE
Suite, Apt. #, etc.

2a. Mailing Address
26 5143 S. UNIVERSITY DRIVE
Suite, Apt. #, etc.

22 City & State
23 DAVIE, FL

27 City & State
28 DAVIE, FL

24 Zip
33328

25 Country

29 Zip
33328

30 Country

9. Name and Address of Current Registered Agent

FINKELSTEIN, JAY
2719 PINE HURST DR.
FT. LAUDERDALE FL 33332

10. Name and Address of New Registered Agent

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 fee if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME FINKELSTEIN, JAY
STREET ADDRESS 2719 PINE HURST DR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE V ☐ DELETE

NAME FINKELSTEIN, LINDA
STREET ADDRESS 2719 PINE HURST DR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE S ☐ DELETE

NAME FINKELSTEIN, PAMELA
STREET ADDRESS 2719 PINE HURST DR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE T ☐ DELETE

NAME FINKELSTEIN, BARBARA
STREET ADDRESS 2719 PINE HURST DR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE

NAME FINKELSTEIN, ROBIN
STREET ADDRESS 2719 PINE HURST DR.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE

NAME FINKELSTEIN, HOWARD
STREET ADDRESS 2719 PINE HURST DR.
CITY-ST-ZIP FT. LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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: [Signature]

3/30/98

954-252-0056

CR2E034 (10/97)