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Feb 11 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 # **551771** **(9)**

1. Corporation Name
F.T.P. INC.

Principal Place of Business	Mailing Address
2431 NE 33RD ST LIGHTHOUSE PT FL 33064	652 SW 12THA VE DEERFIEL:D EBACH FL 33442-3112 US

3. Date Incorporated or Qualified: 11/22/1977
3a. Date of Last Report: 02/26/1996

2. Principal Place of Business	2a. Mailing Address
21 201 N. Federal Hwy	26 201 N. Federal Hwy
Suite, Apt. #, etc. 22 Ste 114	Suite, Apt. #, etc. 27 Ste 114
City & State 23 Deerfield Bch, Fl.	City & State 28 Deerfield Bch, Fl.
Zip 24 33441 Country 25 USA	Zip 29 33441 Country 30 USA

4. FEI Number: 59-1790373 ☐ 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
DENUNZIO & HILL 440 E. SAMPLE ROAD SUITE 207 POMPANO BEACH FL 33064	81 Name: D Douglas Hill 82 Street Address (P.O. Box Number is Not Acceptable): 201 N. Federal Hwy Ste. 114 83 84 City: Deerfield Bch. FL 85 Zip Code: 33441

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] 2-3-97
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	PD	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	TAVERRITE, FRANK		1.2 NAME		
STREET ADDRESS	440 E SAMPLE RD, S207		1.3 STREET ADDRESS	201 N. Federal Hwy. Ste. 114	
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP	Deerfield Bch., Fl. 33441	
TITLE	SD	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	TAVERRITE, SYLVIA D		2.2 NAME		
STREET ADDRESS	440 E SAMPLE RD, S207		2.3 STREET ADDRESS	201 N. Federal Hwy. Ste 114	
CITY-ST-ZIP	POMPANO BEACH FL		2.4 CITY-ST-ZIP	Deerfield Bch., Fl. 33441	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			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		

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: [signature] 2-3-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #