

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

FILED
Mar 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **565450**

1. Corporation Name

1702, INC.

Principal Place of Business

**ATTN: REJEAN LAPIERRE
7800 W. OAKLAND PARK BLVD.
BLDG. "G"
SUNRISE, FL. 33351**

Mailing Address

**ATTN: REJEAN LAPIERRE
7800 W. OAKLAND PARK BLVD.
BLDG. "G"
SUNRISE, FL. 33351**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/17/78

4. FEI Number

59-2498112

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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 7800 W. OAKLAND PARK BLVD.

2a. Mailing Address

26 7800 W. OAKLAND PARK BLVD.

Suite, Apt. #, etc.

22 BLDG. "G"

Suite, Apt. #, etc.

27 BLDG. "G"

City & State

23 SUNRISE, FL.

City & State

28 SUNRISE, FL.

Zip

24 33351

Country

25 USA

Zip

29 33351

Country

30 USA

9. Name and Address of Current Registered Agent

**LAPIERRE, REJEAN
7800 W. OAKLAND PARK BLVD. BLDG. "G"
SUNRISE, FL. 33351**

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 date of signature

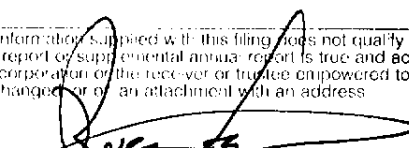
(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	METZGER, NERINA	1.2 NAME	
STREET ADDRESS	3900 GALT OCEAN MILE C	1.3 STREET ADDRESS	
CITY- ST- ZIP	FORT LAUDERDALE, FL.	1.4 CITY- ST- ZIP	
TITLE	T	2.1 TITLE	☐ Change ☐ Addition
NAME	REJEAN LAPIERRE	2.2 NAME	
STREET ADDRESS	7800 W. OAKLAND PARK BLVD. BLDG. "G"	2.3 STREET ADDRESS	
CITY- ST- ZIP	SUNRISE, FL. 33351	2.4 CITY- ST- ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		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 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 of an attachment with an address.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REJEAN LAPIERRE

2-25-98

954-749-8802

CR2E034 (10/97)