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PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 07 1997 8:00am

Secretary of State

954-525-1000

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Secretary of State

*
DIVISION OF CORPORATIONS

1997

DOCUMENT # 604509

(0)

GUSTAFSON, STEPHENS, FERRIS & KNIGHT, P.A.

| Principal Place of Business Mailing Address | | | | | | | | |
|---|---|---|------------------------|----------------------|--|-----------------------------|----------------|--|
| 540 NORTHEAST 4" FT LAUDERDALE F | 540 NORTHEAST 4TH, STRE FT LAUDERDALE FL 33301-1 | | | | | | | |
| TI CHOPENDALE TI | 2 00001 | I I bridgelighte te best t | | | | | | |
| | | | | | 3. Date Incorporated or Qualified 07/10/1973 | 3a. Date of Last 02/16/1996 | | |
| 2. Principal Place | | 2a. Mailing Address | | | 4. FEI Number | | Applied For | |
| | Broward Blvd. | 26 P.O. Box 14070 | | | 59-1467289 | | Not Applicable | |
| Suite, Apt. #. et 22 Suite 13 | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired See Required | | | |
| City & State | | City & State | | | | | | |
| | derdale, FL | 28 Fort Lauderdale, FL | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip | Country | Zip | Countr | / | 8. This corporation has liability for i | | | |
| 24 33301 | 25 Broward | 29 33302-4070 3 | o Brov | vard | | Yes No | | |
| | Name and Address of Current | Registered Agent | | T 111 | 10. Name and Address of New Re | glatered Agent | | |
| | ENS JOHN E, JR | | 81 | Joel K | . Gustafson | | | |
| 540 NE 4TH ST FT ŁAUDERDALE FL 33301 | | | 82 | Street Addr | Address (P.O. Box Number is Not Acceptable) | | | |
| FI (AUI | DERUALE PL 33301 | | 83 | | st Broward Boulevard | | | |
| | ^ | | | Suite | 1300 | | | |
| | | | 84 | | auderdale FL 85 Zip Code 33301 | | | |
| 11. Pursuant to the | e provisions of Sections 607.0502 | and 607.1508, Florida Statutes | the abov | e-named corp | poration submits this statement for the p | | | |
| office or regist | tered agent, or both, in the State | of Florida Such change was autions of Section 607 0505. Flori | thorized b | y the corporat | oration submits this statement for the p ion's board of directors. I hereby accep | ot the appointment a | is registered | |
| SIGNATURE | XXXXX | 1// | | - | 3 / | 13/97 | | |
| Signa | iture, typed or world name of returned ag | | | ent signature requir | ed when reinstating) | DATE | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFIC | | | |
| TITLE VI | ERRIS ROBERT JR | ☐ DELETE | 1.1 TITLE | | | XIX. Change | Addition | |
| | 10 NE TH STREET | | 1.2 NAME | ADDRESS On | e E. Broward Blvd., S | 344~ 1200 | | |
| | LAUDERDALE, FL 00000 | | 1.4 C/TY- | | | 3301 | | |
| TOLE D | | DELETÉ | 2.1 TITLE | 51-20 | re rauderdare, ru J. | XX Change | Addition | |
| NAME KI | NIGHT, GERALD L. | | 2.2 NAME | | | | | |
| | 40 NE 4TH STREET | | 2.3 STREE | ADDRESS On | e East Broward Blvd., | Suite 130 | 0 | |
| | LAUDERDALE, FL 00000 | | 2. 4 CITY- | | rt Lauderdale, FL 33 | | | |
| TITLE SL | | XXX DELETE | 3.1 TITLE | | | Change | Addition | |
| | TEPHENS, JOHN JR | | 3.2 NAME | . | | | | |
| | 40 NE 4TH STREET T LAUDERDALE, FL 00000 | | | r address | | | | |
| | | ☐ DELETE | 3.4. CITY- | ST-ZIP | | XXI Change | Addition | |
| | USTAFSON, JOEL | ☐ DETEIE | 4.1 TITLE 4. 2 NAME | | | #NEXT Citable | , Audilion | |
| | 10 NE 4TH STREET | | | | e East Broward Blvd., | Suite 130 | Ю | |
| | T LAUDERDALE, FL 00000 | | 4.4 CITY- | FO FO | rt Lauderdale, FL 33 | 3301 | - | |
| TITLE | | DELETE | 51 TITLE | | | ☐ Change | Addition | |
| NAME | | | 5.2 NAME | | | | ***** | |
| STREET ADDRESS | | | 5.3 STREE | ADDRESS | | | | |
| CITY - ST - ZIP | | | 54 CITY- | ST-ZIP | | | | |
| TITLE | · | DELETE | 6.1 TITLE | | | ☐ Change | Addition | |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREE | ADDRESS | | | | |
| CITY ST. 7P | | | 64 City. | 27. 710 | | | | |

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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

POWED NAME OF SIGNING OFFICER OR DIRECTOR