FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 651484

(8)

S. & P. GENERAL CORP.

3. a.r	. GENERAL CORF.								
Principal Place	of Business	Mailing Add	Iress			C 130(18 O(18) Biter it	Bit Atan 1811 stat etelt)(B))
P.O. BOX 54	03	P.O. BOX	5403						
	DALE FL 33310-5403	FT. LAUD	DERDALE FL 33310	-5403					
						3. Date Incorporated or 11/16/1979		ate of Last Re 05/01/199	
2 Principal Pla	ace of Business	2a. Mailing a	Address			4. FEI Number			Applied For
21	300 01 200311000	26				59-1958104		I	Not Applicable
Suite, Apt. i	#, etc.	Suite, A	pt. #, etc.			5. Certificate of Status I	Desired		Additional
22		27		.,,		O. Cerminatio er Guitto		Fee F	Required
City & State)	City & S	State			6. Election Campaign F	" []	•	May Be
23		28	·			Trust Fund Contribut	IOI1		to Fees
Ζφ	Country	Zipi rath		Country		This corporation has Florida Statutes	liability for intangible ☐ Yes ☐ No	tax under s	199.032,
24	9. Name and Address of Cur	29	30	Ч		10. Name and Address		d Agent	
	9, Name and Address of Con	tent neglistered ng		81	Name				
LEVAN	ALAN B						st Appointable)		
	. SUNRISE BLVD.			82	Street	Address (P.O. Box Number is No	и Ассернале;		
THIRD I				83					
	IDERDALE FL 33310							65 70	o Code
11.00	MEINARE I E 00010			84	City		F	L 85 Zip) Code
familiar wi	to the provisions of Sections (DZ), red agent, or both, in the State of F ith, and accept the obligations of, S Signaries predictions care of registered.	Section 607.0505, FR	onda Statutės			required when reads along? ADDITIONS CHANG	DATE		
12.	T PD	AND DIRECTORS] DELETE	1 1 Tifté	,	ADDITIONS CHARG	ESTO OTTIOETIST	Change	☐ Addition
TITLE	LEVAN, ALAN B.	L.	John	1.2 NAME					
NAME	1750 E. SUNRISE BLVD.	THIRD FLOOR		1.3 STREET	APRIESS				
STREET ADDRESS CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 CHY - S					
THILE	VTS		DELETE	2 1 TITLE				Change	Add-tion
NAME	GILBERT, GLEN R.		- 1	2.2 NAME					
STREET ADDRESS	1750 E. SUNRISE BLVD.	THIRD FLOOR		2.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL			2.4 CITY - 3	32 - ZIP				
TITLE		Ċ] DELETE	3 1 THILE				Change	Addit on
NAME				32 NAME					
STREET ADDRESS				3.3 STREE	1 ADDRESS				
CITY-S1-7IP			T occurre	3.4 CITY - :	ST - Z1F			☐ Change	Addition
TITLE] DEFELE	4 1 T-TLF				ET change	☐ vocinon
NAME				4.2 NAME	. 100000				
STREET ADDRESS				4 3 STREE		1			
CITY-ST-ZIP			DELETE	4.4 CHY- 5.1 TULE	51 - ZIP			Change	Addition
TITLE		L		52 NAME				<u></u> ,	
NAME					i address				
STREET ADDRESS				54 CiTY					
CITY-ST-ZIP TIFLE		···· ··· ··· ··· ··· ··· ··· ···	DELETE	6 1 TITLE				Change	Addition
NAME			= **	6 2 NAME					
STREET ADDRESS				1	T ADDRESS	3			

City-S1-2IP

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

GLEN R. GILBERT
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/24/96

954-760-5208

;R2E034 (12/95)