

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 651876 (5)

1. Corporation Name
P.I.V. FINANCIAL CORP.

Principal Place of Business

901 NW 17TH ST. SPACE C
MIAMI FL 33136

Mailing Address

901 NW 17TH ST. SPACE C
MIAMI FL 33136



3. Date Incorporated or Qualified
12/06/1979

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FEINGOLD, INEZ
9021 S.W. 60 TERR
MIAMI FL FL 33173

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 title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S AGOVINO, SUSAN FEINGOLD ☐ DELETE

NAME 8570 N.W. 32 ST.

STREET ADDRESS CORAL SPRINGS FL

CITY- ST- ZIP

TITLE PDT FEINGOLD, INEZ ☐ DELETE

NAME 9021 S.W. 60TH TERR

STREET ADDRESS MIAMI FL

CITY- ST- ZIP

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY- ST- ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY- ST- ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY- ST- ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY- ST- ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 NAME

12 STREET ADDRESS

13 CITY- ST- ZIP

14 CITY- ST- ZIP

21 NAME

22 STREET ADDRESS

23 CITY- ST- ZIP

24 CITY- ST- ZIP

31 NAME

32 STREET ADDRESS

33 CITY- ST- ZIP

34 CITY- ST- ZIP

41 NAME

42 STREET ADDRESS

43 CITY- ST- ZIP

44 CITY- ST- ZIP

51 NAME

52 STREET ADDRESS

53 CITY- ST- ZIP

54 CITY- ST- ZIP

61 NAME

62 STREET ADDRESS

63 CITY- ST- ZIP

64 CITY- ST- ZIP

14. I 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: INEZ FEINGOLD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96
Date

305 324-8355
Daytime Phone #

CR2E034 (12/95)