

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 # 683218 (2)

1. Corporation Name

ACCU-PROP, INC.



Principal Place of Business

1569 NORTH DIXIE HIGHWAY
POMPANO BEACH FL 33060

Mailing Address

1569 NORTH DIXIE HIGHWAY
POMPANO BEACH FL 33060

3. Date Incorporated or Qualified
08/28/1980

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 600 NE 33RD ST

26 600 NE 33RD ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 "C"

27 "C"

City & State

City & State

23 Pompano Beach FL

28 Pompano Beach FL

Zip

Country

Zip

Country

24 33064

25 U.S.A.

29 33064

30 U.S.A.

4. FEI Number

59-2020258

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

STANTON, JEFFREY R.
1569 N DIXIE HWY
POMPANO BEACH, FL
33060

81 Name

STANTON, Jeffrey R

82 Street Address (P.O. Box Number is Not Acceptable)

600 NE 33RD ST

83

"C"

84 City

POMPANO BEACH

FL

85 Zip Code

33064

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 Jeffrey R. STANTON "P"

Signature, typed or printed name of registered agent and title if applicable.

(Not required if Agent signature required when reinstating)

4/18/96

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME STANTON, JEFFREY
STREET ADDRESS 1569 N DIXIE HWY
CITY-ST-ZIP POMPANO BEACH, FL 00000 ☐ DELETE

TITLE P
NAME LARA, MICHAEL
STREET ADDRESS 1569 N DIXIE HWY
CITY-ST-ZIP POMPANO BEACH, FL 00000 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE P
12 NAME Jeffrey R. STANTON ☒ Change ☐ Addition
13 STREET ADDRESS 600 NE 33RD ST.
14 CITY-ST-ZIP POMPANO BEACH FL 33064

2 1 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

3 1 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

4 1 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

5 1 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

6 1 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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: Jeffrey R. STANTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey R. Stanton

4/18/96

DATE

(954) 781-0192

Daytime Phone #

CR2E034 (12/95)