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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 686865

DAVID BORSTEIN, INC.

Principal Place of Business Mailing Address 9086 CYPRESS GREEN DR 9086 CYPRESS GREEN DR. JACKSONVILLE FL 32256 JACKSONVILLE FL \$2256-7791 3. Date incorporated or Qualified 3a. Date of Last Report 09/08/1980 03/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-202300° Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, IZ No Yes 25 20 30 Florida Statutes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BORSTEIN, DAVID 9086 CYPRESS GREEN DR. Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32256 83 84 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. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. Stip atun, typed or protect nan is of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DELETE Change Addition 111. F 1.1 TITLE BORSTEIN, DAVID 1.2 NAME MAME 8974 BROOKSHIRE CT STREET ADDRESS 1.3 STREET ADDRESS JAX FL 1.4 CITY-ST-ZIP CETY - ST - ZIP DELETE Change Addition 2.1 TITLE 101.8 BORSTEIN, EVELYN S 2.2 NAME NAM! 8974 BROOKSHIRE CT 2.3 STREET ADDRESS STREET ADDRESS JAX FL 2.4 CITY-ST-ZIP CHY-SI-ZIP DELETE Change Addition 3.1 TITLE THE BORSTEIN, CHARLES A. NAM: 3.2 NAME 12757 LOCREN RD. 3.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name Lain an officer or director or une company appears in Block 12 or Block 13 if changed of

3.4. CITY - \$T - ZIP

4.9 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

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SIGNATURE:

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NAME

JACKSONVILLE FL

JACKSONVILLE FL

BORSTEIN, DONALD K.

8607 DEERMOSS WAY E.

DELETE

DELETE

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Change

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Addition

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Addition

FILED

May 14 1997 8:00am

Secretary of State