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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # F19717

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SILVERMAN & REIMER, P.A.

Principal Place of Business Mailing Address 3184 S. CONGRESS AVE. 3184 S. CONGRESS AVE. PALM SPRINGS FL 33461 PALM SPRINGS FL 33461 3. Date Incorporated or Qualified 3a. Date of Last Report 02/13/1981 04/25/1995 2. Principal Place of Business 2a. Mailing Address **FEI Number** Applied For 21 59-1952696 26 Not Applicable Suite, Apt. #, etc Suite Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired П 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Ζφ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name REIMER, BRIAN Street Address (P.O. Box Number is Not Acceptable) 3184 S. CONGRESS AVE. 83 PALM SPRINGS FL 33461 Crty Zip Code 85 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. Thereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607.0505, Fiorida Statutes. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 (1)(8 REIMER, BRIAN NAME 12 NAME 3184 S. CONGRESS AVE. STREET ADDRESS 1.3 STREET ADDRESS PALM SPRINGS FL CITY - S1 - ZIP 14 CITY-SEZH DELETE Add tion TITLE 2.1 TITLE Change SILVERMAN, STEVEN NAME 2.2 NAME STREET ADDRESS 3184 S. CONGRESS AVE. 2.3 STREET ADDRESS PALM SPRINGS FL CITY-ST-7IP 2.4 City - St - Zif DELETE! THILE 3 1 THE ☐ Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS Diffy-ST-7le 3.4 City - \$1 - 20F DELETE TITLE Add tion 4 1 HILE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS DELETE TITLE 5 1 1IILE ☐ Change Addition STREET ADDRESS 5 3 STREET ADDRESS 5.4 CHTY - \$1. ZIF CITY-ST-ZIP DELETE TITLE ☐ Change Addition STREET ADDRESS 6.3 STREET ADDRESS

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)(x). Florida Statutes I furnished and does not qualify for the exemption stated in Section 119.07(3)(x). Florida Statutes I furnished and does not qualify for the exemption of 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 is changed, or on an attachment with an actives.

€ 4 C TY - ST - ZIF

SIGNATURE:

City - ST - 7/P

SIGNATURE AND TYPAD OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

(40) 967-665A

CR2E034 (12/95)

FILED

Secretary of State

May 01 1996 8:00 am