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FILED

Apr 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F24922 (9)
1. Corporation Name
ORIOLE-BOCA, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
~~E.E. HUBSHMAN~~ ~~E.E. HUBSHMAN~~
1690 S CONGRESS AVE. STE 200 1690 S CONGRESS AVE. STE 200
DELRAY BEACH FL 33445 DELRAY BEACH FL 33445

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 25 29 30
9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/17/1981

4. FEI Number

59-2305076

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

~~HUBSHMAN, E.E.~~
1690 S CONGRESS AVE, STE 200
DELRAY BEACH FL 33445

81 Name
Pivinski, Joseph

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

Joseph Pivinski, Vice President 4/10/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD ☐ DELETE
NAME LEVY, RICHARD D.
STREET ADDRESS 1690 S CONGRESS AVE 200
CITY-ST-ZIP DELRAY BEACH FL

1.1 TITLE V/T ☐ Change ☒ Addition
1.2 NAME Pivinski, Joseph
1.3 STREET ADDRESS 1690 S. Congress Ave, 200
1.4 CITY-ST-ZIP Delray Beach, FL 33445

TITLE VD ☒ DELETE
NAME HUBSHMAN, E.E.
STREET ADDRESS 1690 S CONGRESS AVE 200
CITY-ST-ZIP DELRAY BEACH FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD ☐ DELETE
NAME LEVY, HARRY A.
STREET ADDRESS 1690 S CONGRESS AVE 200
CITY-ST-ZIP DELRAY BEACH FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VTD ☒ DELETE
NAME NUNEZ, ANTONIO (A/S)
STREET ADDRESS 1690 S CONGRESS AVE 200
CITY-ST-ZIP DELRAY BEACH FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE PD ☐ DELETE
NAME LEVY, MARK A.
STREET ADDRESS 1690 S CONGRESS AVE 200
CITY-ST-ZIP DELRAY BEACH FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CP2E034 (10/97)