## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F28533

BLOCK AND BRAND, PA

TITLE NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FILED Jan 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1044 N.E. 15TH AVE. 1044 N.E. 15TH AVE. FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/06/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2071544 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name BLOCK, NANCY B 1044 N.E. 15TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33304 83 City 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** (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DP ☐ Change ☐ Addition DELETE TITLE 11 TITLE **BLOCK, NANCY B** NAME 1.2 NAME 1044 N.E. 15TH AVE. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33304 CITY-ST-ZIP 1.4 CITY-ST-ZIP DVP DELETE Change Addition TITLE 2.1 TITLE BRAND-EAGON, JANE M 2.2 NAME NAME 1044 NE 15 AVE. STREET ADORESS 2.3 STREET ADDRESS FT. LAUDERDALE FL 33304 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 attactment with an address.

4.1 TITLE

4. 2 NAME

5.1 TOLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

DELETE

DELETE

DELETE

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Change

Change

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Addition

Addition