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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT # F34553

(0)

BEN-AIR LIMITED, INC.

FILED Mar 02 1998 8:00am Secretary of State

Principal Place of Business					Mailing Address						ı yanılan ildə iliki alını disal bisal bisal	ii didii aidhi i		APRIL WH	11 1441	
120 AIRPORT AVE VENICE FL 34285 US					P.O. 129 VENICE FL 34285 US						DO NOT WRITE IN THIS SPACE					
										3.	Date Incorporated or Qualified 05/13/1981					
2.	Principal Pl	lace of Busi	ness	12	2a. Mailing Address					4	, FEI Number			Applie	ad For	
21	·				26						59-3071786		Н		pplicable	
<u> </u>	Suite, Apt. #, etc.				Suite, Apt. #, etc.								\$8.7			
22	.]				27					5	. Certificate of Status Desired	V	Fee	Requi	red	
í	City & State				City & State					6.	. Election Campalgn Financing		\$5.0	00 ма	у Ве	
23				26	28			·_··			Trust Fund Contribution		Add	ed to F	898	
_	Zip		Country		Zıp		Coun	itry		8	. This corporation owes or has pa		- '	_ `		
24			25	21			30			_بلـ	Personal Property Tax due June		Yes	ЦΝ	lo	
<u> </u>	-		and Address	of Current Reg	istered A	gent	 ,	81	Name	10. Name and Address of New Registered Agent						
ļ		YNE, JOHN]	["	Maille							
1028 NE 45TH ST									Street Add	ress (I	P.O. Box Number is Not Acceptab	le)				
ŀ	FT LAUDERDALE FL															
4																
1							Į.	84	City				85 Z	ip Cod	le	
L.,				002000	207 4500	Er ide S ter	Щ.				FL					
11	office or re	to the provis a gis tered ac	ions of Sections ent, or both, in	s 607.0502 and the State of Flo	i 607.1508. orida: Such	, Florida Statu: i change was	les, the abo authorized	evo by	named corpora- the corpora	ooratio tion's	on submits this statement for the placed of directors. I hereby accept	urpose of tithe appo	changin; intment	g its re as rec	gistered iistered	
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 registe agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.																
SIGNATURE											· 					
Signature, typed or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS						ie. (NO	E: Registered Agent signature request. 13.				ADDITIONS/CHANGES TO OFFIC	DATE EBS AND	DIRECT	ODS II	112	
TITL		PD		20107110 DITT	2010110	DELETE	1.1 TITL	E			ADDITIONAL TO CITY		Chang		Addition	
NAJ	i		Y III, BEN R.			_	1.2 NAM					•				
	IEET ADDRESS	P.O. BO		C.A.		1		-	ADDRESS						ł	
	Y-ST-ZIP	VENICE		SAV	りと	\ NH	1.4 CITY		1							
TITE		1511105			 _	DELETE	2.1 TITL		-211		 		Chang	e L	Addition	
NAA							2.2 NAM		}			•				
l	REET ADORESS								ADDRESS							
	CITY-ST-ZIP							2.4 CITY-ST-ZIP								
	TITLE				☐ DELETE			3.1 TITLE					Chang	e L	Addition	
	NAME						3.2 NAME				_	·	-			
	EET ADDRESS								ADDRESS							
City-st-zip							3.4. CITY-ST-ZIP							- 1		
TITL						DELETE	4.1 TITL						Chang	e L	Addition	
NAN	ME						4. 2 NAM	ME								
STREET ADDRESS					4.3 \$1			NDDRESS						-		
	Y-ST-ZIP						4.4 CITY									
TITL						DELETE	5.1 TITL						Chang	e L	Addition	
NAM	AE !						5.2 NAM	IE	1						1	
STR	EET ADDRESS						5.3 STR	EET A	NODRESS							
	Y-ST-ZIP						5.4 CITY		i							
TITL						DELETE	6.1 TITLE						Chang	e L	Addition	
NAM	AE [6.2 NAM	IE.					_		{	
STA	EET ADDRESS						6.3 STRE	EET A	LODRESS							

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 at alchiment with an address