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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F51947

(2)

ERIC R. SISSER, INC.

Principal	Place o	f Business	

Mailing Address

FILED Apr 08 1997 8:00am Secretary of State



2665 S. BAYSHORE DR., STE, 1200 MIAMI FL 33133		2665 S. BAYSHORE DR. MIAMI FL 33133-5432	2665 S. BAYSHORE DR., STE, 1200 MIAMI FL 33133-5432				
					3. Date Incorporated or Qualified 10/29/1981	3a. Date of L 01/26/19	ast Report
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2155886	F	Not Applicable
Suite, Apt.	#, elc	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional ee Required
City & State	В	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be Ided to Fees
Zip 24	Country 25	Ζφ 29	Count 30	ry	8. This corporation has liability for I Florida Statutes	ntangible tax un Yes \[\] No	der s. 199.032,
	9. Name and Address of C	Current Registered Agent			10. Name and Address of New Re	gistered Agent	
MAD	ORSKY, MARSHA		8	1 Name			
266	5 S BAYSHORE DR #603 IND BAY PLAZA		8	2 Street Add	iress (P.O. Box Number is Not Acceptab	le)	
	MI FL 33133		8	3	<u> </u>		
			8	4 City		FL 85	Zip Code
office or r	egistered agent, or both, in the	07.0502 and 607.1508, Florida Stat State of Florida. Such change was obligations of, Section 607.0505, I	s authorized I	ov the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of chang at the appointme	ing its registered nt as registered
SIGNATURE.	Signalure, typed or philled name of registe	ered agent and title if applicable (Ni	OTE Registered A	gent signature requ	red when reinstating)	DATE	,.
12.		RS AND DIRECTORS	13.	 	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	CTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Ch	
NAME	SISSER, ERIC R		1.2 NAM				
STREET ADDRESS	2665 S BAYSHORE DR #	1200	1.3 STRE	ET ADDRESS			
CITY - ST - ZIF	MIAMI, FLORIDA 0		1.4 CITY	1			
TITLE		☐ DELETE	21 TITLE			Chi	ange Addition
NAME			22 NAMI				
STREET ADDRESS				ET ADDRESS	***		
City-St-ZiP			2.4 CITY				
THLE		DELETE	3.1 TITLE			Ch	ange Addition
NAME			3.2 NAM		·	_	• –
STREET ADORESS	•			ET ADDRESS			
				CT ZID			ange
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empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the corporation or the receivappears in Block 12 or Block 13 if changed, or on an all

SIGNATURE:

Date

Daytime Phone #