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Jan 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F60622 (0)

1. Corporation Name
CO-OP P. C., INC.



Principal Place of Business

7619 DAVIE ROAD EXTENTION
HOLLYWOOD FL 33024

Mailing Address

7619 DAVIE ROAD EXTENTION
HOLLYWOOD FL 33024

3. Date Incorporated or Qualified 12/31/1981
3a. Date of Last Report 03/26/1996

4. FEI Number 59-2147288
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 7621 Davie Road Ext.

Suite, Apt. #, etc.

22

City & State

23 Hollywood, FL

Zip Country

24 33024

2a. Mailing Address

26 7621 Davie Rd Ext.

Suite, Apt. #, etc.

27

City & State

28 Hollywood, FL

Zip Country

29 33024

g. Name and Address of Current Registered Agent

RODRIGUEZ III, FRANCISCO-XAVIER A.
20251 N.W. 42ND AVENUE
MIAMI FL 33055

10. Name and Address of New Registered Agent

81 Name

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

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

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME CRANE, DONALD W.
STREET ADDRESS 2941 W. UTOPIA DR.
CITY - ST - ZIP MIRAMAR FL

TITLE V ☐ DELETE

NAME CRANE, ELIZABETH
STREET ADDRESS 2941 W. UTOPIA DR.
CITY - ST - ZIP MIRAMAR FL

TITLE ST ☐ DELETE

NAME CRANE, WILLIAM D.
STREET ADDRESS 4481 S.W. 52ND CT. APT. 4
CITY - ST - ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME Crane, Donald W.
1.3 STREET ADDRESS 1000 Colony Point Circle #401
1.4 CITY - ST - ZIP Pembroke Pines, FL 33026

2.1 TITLE V ☒ Change ☐ Addition

2.2 NAME Crane, Elizabeth
2.3 STREET ADDRESS 1000 Colony Point Circle #401
2.4 CITY - ST - ZIP Pembroke Pines, FL

3.1 TITLE ST ☒ Change ☐ Addition

3.2 NAME Crane, William D.
3.3 STREET ADDRESS 2700 S. University Dr. #1A
3.4 CITY - ST - ZIP Ft. Lauderdale, FL 33328

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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: William D. Crane 1/8/97 (954) 435-2832
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0517302

CR2E034 (9/96)