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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

7100 N. KENDALL DRIVE

MIAMI FL 33156-7839

SUITE 210



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F84630

(5)

7100 NORTH KENDALL DRIVE

Mailing Address

MIAMI FL 33156-7839

SUITE 210

ENCORE INVESTMENTS, INC.

FILED		
Apr 15 1997 8	3:00am	
Secretary of	State	

Date Incorporated or Qualified 06/09/1982	3a. Date of L 04/23/19	ast Report
EEI Number	1	Applied Ed

3. 2. Principal Place of Business 2a. Mailing Address 59-2266901 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Ziri Country 8. This corporation has flability for intangible tax under s. 199.032, Žψ Yes You Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MANDEL, ROBERT S Name 7100 N. KENDALL DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 210** 63 **MIAMI FL 33156** 84 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. Lam familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signation, type the pential name of regressed agent and the it applicable (NOTE: Flegistered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition THILE DELETE 1.1 TITLE MANDEL, ROBERT S 1.2 NAME **CR2E034** NAME 7100 N. KENDALL DRIVE #210 1.1 STREET AODRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP 017-51-78 Change DELETE Addition 2.1 TITLE TITES MANDEL, RONA NAME 2.2 NAME 7100 N. KENDALL DRIVE 210 2 3 STREET ADDRESS STREET ACTORESS MIAMI FL 2. 4 CITY-ST-ZIP CHM - \$1 - 769 DELETE Change Addition 3 1 TITLE 101.6 3.2 NAME NAME **3.3 STREET ADDRESS** STREET ADDRESS 3 4. CHY-ST-ZIP CHY-SI-7# DELETE 41 TITLE Change ____ Addition TILE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ALEBRESS 4.4 CITY - ST - ZIP CITY-ST ZIE DELETE Change Addition 5.1 TITLE TRUE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY \$1-26 DELETE Addition Change DIL.E 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

appears in Block 12 or Blo

14. It do hereby cert fy that the information supplied with his fill information indicated on this arm at report or supplier end. I am an officer or director of the corp ration or the very very

POBERT S. MAN

4/1/97 (305)670-067/

ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that er or trustred empowered to execute this report as required by Chapter 807. Florida Statutes; and that my name