

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F92872** (3)  
1. Corporation Name  
**FLAGLER MANAGEMENT & DEVELOPMENT, INC.**



Principal Place of Business  
**% PEDRO E. VASALLO**  
**14035 SW 72 AVE**  
**MIAMI FL 33158**

Mailing Address  
**% PEDRO E. VASALLO**  
**14035 SW 72 AVE**  
**MIAMI FL 33158**

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip Country  
24

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29 30

3. Date Incorporated or Qualified **07/20/1982** 3a. Date of Last Report **03/15/1995**

4. FFI Number **59-2205834** 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

10. Name and Address of New Registered Agent

**9. Name and Address of Current Registered Agent**

**VASALLO, PEDRO E.**  
**14035 SW 72 AVE**  
**MIAMI FL 33158**

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 of the person filing this report and the person who is the registered agent or the person who is the registered office of the corporation.

DATE

12. OFFICERS AND DIRECTORS

DELETE

1. TITLE **D**  
2. NAME **VASALLO, PETER E.**  
3. STREET ADDRESS **14035 SW 72 AVE**  
4. CITY-STATE-ZIP **MIAMI FL**

DELETE

1. TITLE **DST**  
2. NAME **VASALLO, DAWN D**  
3. STREET ADDRESS **14035 SW 72 AVE**  
4. CITY-STATE-ZIP **MIAMI, FL 00000**

DELETE

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP

DELETE

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP

DELETE

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change  Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  Change  Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Dawn Vasallo* **DAWN DUASALLO PRES.** 3-17-96 305-2382746  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)