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Feb 14 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 # F94000006051 (6)

1. Corporation Name
VAR HOLDINGS CORP.



Principal Place of Business
100 SE 2ND STREET, 32ND FLOOR
MIAMI FL 33131

Mailing Address
100 SE 2ND STREET, 32ND FLOOR
MIAMI FL 33131-2100

3. Date Incorporated or Qualified 11/28/1994
3a. Date of Last Report 02/01/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country

4. FEI Number 65-0533007
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

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CPD	1.1 TITLE	VT
NAME	LEBOW, BENNETT S	1.2 NAME	Van Sicken, Joselynn D.
STREET ADDRESS	100 SE 2ND STREET, 32ND FLOOR	1.3 STREET ADDRESS	100 SE Second Street- 32nd Floor
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL 33131
TITLE	VT	2.1 TITLE	AS
NAME	SAUTER, GERALD E	2.2 NAME	Balog, Andrew E.
STREET ADDRESS	100 SE 2ND STREET, 32ND FLOOR	2.3 STREET ADDRESS	100 S.E. Second Street- 32nd Floor
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL 33131
TITLE	S	3.1 TITLE	AS
NAME	BELL, MARC N	3.2 NAME	Kirkland, III, J. Bryant
STREET ADDRESS	100 SE SECOND ST., 32ND FLOOR	3.3 STREET ADDRESS	100 SE. Second Street- 32nd Floor
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami, FL 33131
TITLE		4.1 TITLE	VI
NAME		4.2 NAME	Lampen, Richard J.
STREET ADDRESS		4.3 STREET ADDRESS	100 SE Second Street- 32nd Floor
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Miami, FL 33131
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Joselynn D. Van Sicken* 01-13-97 305-579-8000
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)