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**Apr 30 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 # G17868 (2)
1. Corporation Name
701 BUILDING CORP.



Principal Place of Business
**701 S.E. 6TH AVENUE
DELRAY BCH. FL 33483**

Mailing Address
**701 S.E. 6TH AVENUE
DELRAY BCH. FL 33483-5112**

3. Date Incorporated or Qualified
01/06/1983

3a. Date of Last Report
05/01/1996

4. FEI Number
59-2246630

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

2a. Mailing Address

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. Zip Country

25. Country

26. Suite, Apt. #, etc.

27. City & State

28. Zip Country

29. Zip Country

30. Country

9. Name and Address of Current Registered Agent

~~MYERS, MARK~~
~~701 SE 6TH AVENUE~~
~~DELRAY BEACH FL 33444~~

10. Name and Address of New Registered Agent

81. Name
SCHERER DANA

82. Street Address (P.O. Box Number is Not Acceptable)
701 SE 6TH AVENUE

83.

84. City
DELRAY BEACH **FL** 85. Zip Code
33483

11. Pursuant to the provisions of Sections 607.050 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]* **DANA SCHERER, VP** **4/18/97**
Signature, typed or printed name of registered agent and fee-if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **PD FLORESCUE, BARRY W**

STREET ADDRESS **701 SE 6TH AVENUE**

CITY-ST-ZIP **DELRAY BCH, FL 00000**

TITLE DELETE

NAME ~~SV MYERS, MARK~~

STREET ADDRESS ~~701 SE 6TH AVENUE~~

CITY-ST-ZIP ~~DELRAY BCH, FL 00000~~

TITLE DELETE

NAME **VP FLORESCUE, RENATE**

STREET ADDRESS **701 SE 6TH AVENUE**

CITY-ST-ZIP **DELRAY BCH. FL**

TITLE DELETE

NAME **SV SCHERER, DANA**

STREET ADDRESS **701 SE 6TH AVENUE**

CITY-ST-ZIP **DELRAY BCH FL**

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 Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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 *[Signature]*

CR2E034 (9/96)