

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. \* AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**DOCUMENT # G27175**

1. Corporation Name

**AMENDED ANNUAL REPORT**

**FIVE SEAS INVESTORS, INC.**

Principal Place of Business

Mailing Address

**3850 Hollywood Blvd  
Suite 400  
Hollywood, Fl 33021**

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Suite 400  
Hollywood, Fl 33021**

3. Date Incorporated or Qualified  
**03/09/1983**

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

2. Principal Place of Business

2a. Mailing Address

21

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4. FID Number  
**59-2346893**

Applied For  
Not Applied For

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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**\$8.75 Additional Fee Required**

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6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

**\$5.00 May Be Added to Fees**

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8. This corporation has liability for intangible tax under s. 191.33, Florida Statutes.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Cornfeld, Robert M.  
3850 Hollywood Blvd  
Suite 400  
Hollywood, Fl 33021**

81 Name

82 Street Address (P.O. Box Number is Not Accepted)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0802 and 607.1501, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and registered agent and electing a new registered agent. Such change was authorized by the corporation's board of directors. I hereby accept the above mentioned registered agent. I am familiar with and agree to the obligations of Section 607.0805, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1	NAME	PD METZ, HELENE	<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
12.2	STREET ADDRESS	3850 Hollywood Blvd #400 Hollywood, Fl 33021	
12.3	CITY, STATE, ZIP	Hollywood, Fl 33021	
12.4	NAME	CORNFELD, ROBERT M.	<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
12.5	STREET ADDRESS	3850 Hollywood Blvd #400 Hollywood, Fl 33021	
12.6	CITY, STATE, ZIP	Hollywood, Fl 33021	
12.7	NAME	CORNFELD, JEFFREY D.	<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
12.8	STREET ADDRESS	3850 Hollywood Blvd #400 Hollywood, Fl 33021	
12.9	CITY, STATE, ZIP	Hollywood, Fl 33021	
12.10	NAME		<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
12.11	STREET ADDRESS		
12.12	CITY, STATE, ZIP		
12.13	NAME		<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
12.14	STREET ADDRESS		
12.15	CITY, STATE, ZIP		

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

13.1	NAME		<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
13.2	STREET ADDRESS		
13.3	CITY, STATE, ZIP		
13.4	NAME		<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
13.5	STREET ADDRESS		
13.6	CITY, STATE, ZIP		
13.7	NAME		<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
13.8	STREET ADDRESS		
13.9	CITY, STATE, ZIP		
13.10	NAME		<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
13.11	STREET ADDRESS		
13.12	CITY, STATE, ZIP		
13.13	NAME		<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
13.14	STREET ADDRESS		
13.15	CITY, STATE, ZIP		

**800001900368**  
**-07/22/96--01031--022**  
**\*\*\*61.25**

7/22 J2

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF AGING OFFICER OR DIRECTOR

**Robert M. Cornfeld**

7/16/96 (954) 989-2200

CR2E034 (3/96)