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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G33257** (8)

1. Corporation Name

CLUB PUBLICATION, INC.



Principal Place of Business

**665 LA VILLA DRIVE
MIAMI SPRINGS FL 33166**

Mailing Address

**665 LA VILLA DRIVE
MIAMI SPRINGS FL 33166**

3. Date Incorporated or Qualified

04/14/1983

3a. Date of Last Report

05/31/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**ERSKINE, STANLEY B., ESQ.
420 LINCOLN RD., STE. 251
MIAMI BCH. FL 33139**

10. Name and Address of New Registered Agent

81 Name

ALEXANDER C. MORTON

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

665 LA VILLA DR.

83

84 City

MIAMI SPRINGS

FL

85 Zip Code

33166

11. Pursuant to the provisions of Sections 607, 602 and 607, 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office, 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, 1508, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or shareholder

Signature, typed or printed name of registered agent or shareholder

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

**P
MORTON, ALEXANDER C.
665 LA VILLA DR
MIAMI SPRINGS FL**

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

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CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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***225.00**

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)(g), 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 or 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALEXANDER MORTON

5/6/96

(305) 887-1900

CR2E034 (12/95)