

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # H29253

(2)

1. Corporation Name

PINNACLE GROUP, INC.



Principal Place of Business

% JACK COREY  
824 VALENCIA AVE  
CORAL GABLES FL 33134

Mailing Address

% JACK COREY  
824 VALENCIA AVE  
CORAL GABLES FL 33134

2. Principal Place of Business

21 3511 ROYAL PALM AVE

Suite, Apt. #, etc.

22

City & State

23 COCONUT GROVE FL

Zip

24 33133

Country

25 USA

2a. Mailing Address

26 3511 ROYAL PALM AVE

Suite, Apt. #, etc.

27

City & State

28 COCONUT GROVE FL

Zip

29 33133

Country

30 USA

3. Date Incorporated or Qualified

11/05/1984

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2465647

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

COREY, JACK  
924 VALENCIA AVE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

COREY, JACK

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

83 3511 ROYAL PALM AVE

84 City

COCONUT GROVE

FL

85 Zip Code

33133

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5/10/96

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME COREY, JACK  
STREET ADDRESS 924 VALENCIA AVE  
CITY - ST - ZIP CORAL GABLES FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

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 P ☒ Change ☐ Addition

1.2 NAME COREY, JACK  
1.3 STREET ADDRESS 3511 ROYAL PALM AVE  
1.4 CITY - ST - ZIP COCONUT GROVE, FL 33133

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 is truthfully 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:

Signature and typed or printed name of signing officer or director

JACK COREY

5/10/96

305 444 4531

CR2E034 (12/95)