

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90038 050 ***150.00

DOCUMENT # H93842

1. Corporation Name

PARK STRUCTURES INC.

Principal Place of Business

12325 SAMPLE ROAD
CORAL SPRINGS FL 33065
US

Mailing Address

12325 SAMPLE ROAD
CORAL SPRINGS FL 33065
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1986

4. FEI Number

59-2759789

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 owes the current year intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 950 North US 1

Suite, Apt. #, etc.

22 Suite 207

City & State

23 Pompano Beach, FL

Zip

24 33062

Country

25 US

2a. Mailing Address

26 950 North US 1

Suite, Apt. #, etc.

27 Suite 207

City & State

28 Pompano Beach, FL

Zip

29 33062

Country

30 US

9. Name and Address of Current Registered Agent

BAYMAN, ALAN
12325 SAMPLE ROAD
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

Bayman, Kay

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

950 North US 1, Suite 207

83

84 City

Pompano Beach,

FL

85 Zip Code

33062

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

K. Bayman
Signature, typed or printed name of registered agent and title if applicable.

K. Bayman
(NOTE: Registered Agent's signature required when reinstating)

DATE 15 Mar 99

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME BAYMAN, ALAN

STREET ADDRESS 12325 SAMPLE ROAD

CITY-ST-ZIP CORAL SPRINGS FL 33065 950 North US 1, Suite 207

CITY-ST-ZIP Pompano Beach, FL 33062

TITLE VD ☒ DELETE

NAME BAYMAN, ALAN

STREET ADDRESS 12325 SAMPLE ROAD

CITY-ST-ZIP CORAL SPRINGS FL 33065

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 ☐ 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 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 any attachment with an address, with all other like empowered.

SIGNATURE:

K. Bayman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 Mar 99

Date

954-942-0606

Daytime Phone #

0182122

CR2E034 (4/1/98)