

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H95213** (5)

1. Corporation Name

1212 CORP.

Principal Place of Business

**1212 E BROWARD BLVD.
C/O MARTIN SILVERSTEIN
FT LAUDERDALE FL 33301**

Mailing Address

**1212 E BROWARD BLVD.
C/O MARTIN SILVERSTEIN
FT LAUDERDALE FL 33301**



2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**SILVERSTEIN, MARTIN B.
1212 E BROWARD BLVD.
FT LAUDERDALE FL 33301**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.06(2) and 607.15(9), 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 607.06(5), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of the Corporation)

(Signature of Registered Agent or Secretary of the Corporation)

Date

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME **DPS
SILVERSTEIN, MARTIN B.**
STREET ADDRESS **1212 E BROWARD BLVD.**
CITY-ST-ZIP **FT LAUDERDALE FL**

2. TITLE ☐ DELETE

NAME **T
SILVERSTEIN, MARTIN B.**
STREET ADDRESS **1212 E BROWARD BLVD.**
CITY-ST-ZIP **FT LAUDERDALE FL**

3. TITLE ☐ DELETE

NAME **D
SILVERSTEIN, MOLLY A.**
STREET ADDRESS **1212 E BROWARD BLVD.**
CITY-ST-ZIP **FT LAUDERDALE FL**

4. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE ☐ Change ☐ Addition

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE ☐ Change ☐ Addition

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE ☐ Change ☐ Addition

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

25. TITLE ☐ Change ☐ Addition

26. NAME

27. STREET ADDRESS

28. CITY-ST-ZIP

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)(k), Florida Statutes. I further certify that the information included 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, and that I am authorized 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:

Martin B. Silverstein

Martin B. Silverstein

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-96

Page 1 of 1

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