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

Charles

FILED Mar 26 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** J01575 (6)MALL PROMENADE, INC. Mailing Address Principal Place of Business % CHARLES N. PARISI N CHARLES N. PARISI 50 BEACH ROAD APT. 201 50 BEACH ROAD APT. 201 DO NOT WRITE IN THIS SPACE TEQUESTA FL 33469-3533 **TEQUESTA FL 33469-3533** 3. Date Incorporated or Qualified 02/28/1986 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 59-2659049 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 29 25 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent Name BLAKISTON, HENRY HAAS BUILDING, SUITE 600 82 Street Address (P.O. Box Number is Not Acceptable) 1001 US HIGHWAY ONE JUPITER FL 33477 City Zip Code 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1 1 TITLE TITLE 12 NAME NAME PARISI, CHARLES N., SR. STREET ADDRESS 50 BEACH RD #201 1.3 STREET ADDRESS CITY-ST-ZIP **TEQUESTA FL** 1.4 City-St-ZiP DELETE Change Addition 21 TITLE TITLE 2.2 NAME NAME PARISI, ANNE E. 50 BEACH RD #201 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TEQUESTA FL 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME PARISI, CHARLES N., JR. 50 BEACH RD #201 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL Addition DELETE Change 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE Channe TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY+ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Additio TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 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 Block 12 or Block 13 if changed, or on an attachment with an address.