

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 # J89591 (8)

1. Corporation Name

PROMO 87 - I, INC.



Principal Place of Business

7280 W. PALMETTO PARK ROAD
SUITE 106
BOCA RATON FL 33433
US

Mailing Address

7280 W. PALMETTO PARK ROAD
SUITE 106
BOCA RATON FL 33433
US

3. Date Incorporated or Qualified
08/25/1987

3a. Date of Last Report
05/31/1995

2. Principal Place of Business
21 ONE SOUTH OCEAN BLVD.

2a. Mailing Address
26 %FREDERICK M. HEIMBERG, P.A.

4. FEI Number
65-0147949

Applied For
Not Applicable

Suite, Apt. #, etc.
22 SUITE 304

Suite, Apt. #, etc. ONE S. OCEAN BLVD.
27 SUITE 304

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

City & State
23 BOCA RATON, FL

City & State
28 BOCA RATON, FL

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

Zip Country
24 33432 25 USA

Zip Country
29 33432 30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HEIMBERG, FREDERICK M.
7280 W. PALMETTO PARK ROAD
SUITE 106
BOCA RATON FL 33433

81 Name
FREDERICK M. HEIMBERG, P.A.
82 Street Address (P.O. Box Number is Not Acceptable)
One South Ocean Blvd., Suite 304
83
84 City Boca Raton FL 85 Zip Code
33432

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

Frederick M. Heimberg
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/17/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
	PSD			
	GILG, GEORGE	3731 NE 27TH AVE.	LIGHTHOUSE POINT FL 33064	
	V			
	GILF, JACQUES	3731 NE 27TH AVE.	LIGHTHOUSE POINT FL 33064	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 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

George Gilg, President

4/17/96 407-338-7711
Daytime Phone #

CR2E034 (12/95)