

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

FILED

May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

ONE SOUTH OCEAN BLVD
SUITE 304
BOCA RATON FL 33432
US

Mailing Address

ONE SOUTH OCEAN BLVD
SUITE 304
BOCA RATON FL 33432-5143
US

2. Principal Place of Business

21 190 West Palmetto Pk Rd

Suite, Apt. #, etc.

22 c/o PETER B Smith Esq

City & State

23 Boca Raton Fla

Zip

24 33432

Country

25 USA

2a. Mailing Address

26 190 West Palmetto Pk Rd

Suite, Apt. #, etc.

27 c/o Peter B Smith Esq

City & State

28 Boca Raton Fla

Zip

29 33432

Country

30 USA

3. Date Incorporated or Qualified

08/25/1987

3a. Date of Last Report

04/22/1996

4. FEI Number

65-0147949

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

unsure

9. Name and Address of Current Registered Agent

HEIMBERG, FREDERICK M. P
ONE SOUTH OCEAN BLVD., SUITE 304
SUITE 108
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name PETER B Smith Esq
82 Street Address (P.O. Box Number is Not Acceptable)
190 West Palmetto Pk Rd
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

Peter B Smith PETER B SMITH

4/28/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME GILG, GEORGE
STREET ADDRESS 3731 NE 27TH AVE.
CITY-ST-ZIP LIGHTHOUSE POINT FL 33084

☐ DELETE

TITLE V
NAME GILF, JACQUES
STREET ADDRESS 3731 NE 27TH AVE.
CITY-ST-ZIP LIGHTHOUSE POINT FL 33084

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME gulg (not gulf)
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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 an attachment with an address.

SIGNATURE

[Signature]

3/20/97

of PETER B Smith
FL 33432

CR2E034 (9/96)