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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation		<b>'</b> 2 (5)							
Bat	E OF POMPANO, INC.								
Principal Place	of Business	Mailing Address							
404 S. DIXIE HWY POMPANO BEACH FL 33060 POMPANO BEACH FL			L 33060						
					3. Date Incorporated or Qualified 09/18/1987		of Last R 03/22/19		
	ace of Business	2a. Mailing Address			4. FEI Number			Applied For	
Suite Act	# otc	26 Cuito Apt F ala			65-0048789			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apr. #, etc.		5. Certificate of Status Desired	χD	•	5 Additional Required	
City & State	9	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.0	May Be	
Zip 24	Country 25	Ζιρ 29	Cour	lry	8. This corporation has liability for	ntangible ta			1
	g. Name and Address of Curren	t Registered Agent			10. Name and Address of New R	egistered	Agent		┪
			1	Name					
	AN, PHILIP M.		1	Street A	Address (P.O. Box Number is Not Acceptable)				$\dashv$
2424 N.E. 22ND ST.			ļ.	33					
POMPA	ANO BEACH FL 33062			23					
			1	34 City		FL	<b>85</b> Zij	p Code	
11. Pursuant t	to the provisions of Sections 607.050?	and 607.1508, Florida Statute	es, the abov	I e named cor	poration submits this statement for the pur		Inging its r	registered office	8
orregister	ed agent, or both, in the State of Flori: th, and accept the obligations of, Secti	ta. Such change was authorize	ea by the co	rporation's b	poration submits this statement for the pur loard of directors. I hereby accept the appe	ontment as	registered	i agent. I am	
SIGNATURE .									
12.	Signature, typed or protect name of registered agreet OFFICERS AND	a othe Lappinase (NO DIBECTORS	To Buy stered A	gerd signature ou	icing when receiving ADDITIONS/CHANGES TO OFFI	DATE OF DO AND	INDLOTO	VDC IN 40	⊣છે
TIFLE	PD	☐ DELETE	1 1 1 1	LE I			Change		CR2E034 (12/95)
NAME	RATZELL, ROBERT		1.2 NAA	16	PD	-	<b>D 3</b> -		4
STREET ADDRESS	404 S DIXIE HWY		1.3 STR	EET ADDRESS	RATZELL ROBERT 404 S.DIXIE HWY.				[왕
CITY - ST - ZIP	POMPANO BEACH FL		1.4 CIT	(-SI-ZiP	POMPANO BCH.,FL.3	3060			122
TITLE	VD .	X) DELÉTE	2 1 111	.E			Change	ncitibbA 🔲	∣ઘ
NAME	RATZELL, EARL		2 2 NAM	18					
STREET ADDRESS	404 S DIXIE HWY		2.3 STR	EET ADDRESS					
CITY-ST-ZIP	POMPANO BEACH FL STD	Fallouru		'- ST - ZIP					_
TITLE NAME	SUGGS, ROSALEE	<b>₹</b> DELETE	3 1 111			L	Change	Addition	
STREET ADDRESS	128 S CYPRESS RD #828		3 2 NAM	EET ADDRESS					ł
CHTY - ST - ZIP	POMPANO BEACH FL			SI-ZiP					
TITLE		DELFTE	4 1 7:16				Change	Addition	
NAME		<del></del>	4.2 NAV	i		_	J		
STREET ADDRESS			43519	EFT ADDRESS					
CITY - ST - ZIP			4.4 CITY	-ST-ZIF					
TITLE		DELETE	5 1 TITI	.E		E	Change	Addition	1
NAME			5 2 NAM	ie					
STREET ADDRESS			5 3 STR	EL ADDRESS					
CITY - ST - ZIP		Fra pre-eve		- ST - 7IP					_
TITLE		DELETE	6 1 1111				_ Change	Add tion	
NAME			6.2 NAM						
STREET ADDRESS			1	FT ADDRESS					
14. Ldo hereby	v certify that the information supplied w	vith this fund is voluntarily furni		-ST-ZIP	by for the exemption stated in Section 119	17/2//b) Fla	rida Ptalis	too I further	-

Tuo hereby certify that the information supplied with this thing is voluntarily furnished and does not quarify for the exemption stated in Section 119 0/(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 eath; that I am an officer or director of the corporation or the receives or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 if changed in one all attentions with address. 4-18-96 ROBERT K.RATZELL PD

ROBERT K SIGNATURE:

954-942-4889 Dayte e Phone #