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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 28 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # K05277

(4)

PANOFF PUBLISHING, INC.

**SIGNATURE:** 

| Principal Place<br>7100 W. COMN<br>SUITE 108<br>FT. LAUDERDA                       | MERCIAL BLVD.   | Mailing Address 7100 W. COMMERCIAL BLVD. SUITE 106 FT. LAUDERDALE FL 33319-2147 US  |  |   |  |  |
|--|---|---|--|---|--|--|
| US   |   |   |  | 3. Date Incorporated or Qualified 12/07/1987  | 3a. Date of Last Report<br>05/01/1996  |  |
| 2. Principal Pl  | face of Business  | 2a. Mailing Address   |  | 4. FEI Number   | Applied For  |  |
| Suite Apt.   | # etc   | Suite, Apt. #, etc.   |  | 65-0015639  | Not Applicable  \$8.75 Additional  |  |
| 22   |   | 27  |  | 5. Certificate of Status Desired  | Fee Required   |  |
| City & State   |   | City & State  | <del></del>  |   | Election Campaign Financing \$5.00 May Be  |  |
| <b>23</b>  | Country   | 28  |  | Trust Fund Contribution   | Added to Fees  |  |
| 24 Z P   | Country 25  | Zip <b>29</b>   | Country<br>30  | This corporation has liability for it     Florida Statutes  | ntangible tax under s. 199.032,<br>res   No  |  |
| 24   | 9. Name and Address of Curr   |   | 30   | 10. Name and Address of New Reg   |  |  |
| WIEI   | NER, MARVIN I.  |   | 81 Name  |   |  |  |
| 2121 PONCE DE LEON BLVD  |   |   | 82 Street Add  | ress (P.O. Box Number is Not Acceptable   | lo)  |  |
| SUITE 1040   |   |   | Street Add   | ress (F.O. Box Number is Not Acceptable   | ю  |  |
| COR  | RAL GABLES FL 33134   |   | 83   |   |  |  |
|  |   |   | 84 City  |   | FL 85 Zip Code   |  |
| office or re<br>agent. Far<br>SIGNATURE  | to the provisions of Sections 607.0<br>egistered agent, or both, in the Stam familiar with, and accept the ob<br>Signature typical or ported harder of ingestered | ile of Florida. Such change was a<br>ligations of, Section 607.0505, Fk   | authorized by the corporal<br>prida Statutes.  | poration submits this statement for the pition's board of directors. I hereby accep   | urpose of changing its registered it the appointment as registered                       |  |
| 12.  |   | NDD DIRECTORS   | E Registered Agent signature requi   | ADDITIONS/CHANGES TO OFFICE   | DATE<br>EDS AND DIDECTORS IN 12  |  |
| TITLE  | PO  | ☐ DELETE  | 1.1 TITLE  | ADDITIONO AND   | Change Addition  |  |
| NAME   | PANOFF, WILLIAM A.  |   | 1.2 NAME   |   | •  |  |
| STREET ADDRESS   | 20846 PINAR TRAIL   |   | 1.3 STREET ADDRESS   |   |  |  |
| CITY-ST-ZIP  | BOCA RATON FL   |   | 1.4 CHTY - ST - ZIP  |   |  |  |
| TITLE  | VP  | L DELETE  | 2.1 TITLE  |   | Change Addition  |  |
| NAME   | PANOFF, IRENE<br>20846 PINAR TRAIL  |   | 2.2 NAME   |   |  |  |
| STREET ADDRESS   | BOCA RATON FL   |   | 2.3 STREET ADDRESS   | •   |  |  |
| CITY - ST - ZIP<br>TITLE   | DOON INTON I L  | DELETE  | 2. 4 CITY-ST-ZIP<br>3.1 TITLE  |   | ☐ Change ☐ Addition  |  |
| NAME   |   | _   | 3.2 NAME   |   | E change   |  |
| STREET ADDRESS   |   |   | 3.3 STREET ADDRESS   |   |  |  |
| City - ST - ZIP  |   | · ·   | 3.4 CITY-ST-ZIP  |   |  |  |
| TITLE  | <del></del>   | DELETE  | 4.1 TITLE  | •   | . Change Addition  |  |
| NAME   |   |   | 4. 2 NAME  |   | 4  |  |
| STREET ADDRESS   |   |   | 4 3 STREET ADDRESS   | •   | •  |  |
| CITY-ST-ZIP  |   | DELETE  | 4.4 CITY-ST-ZIP  |   |  |  |
| NAME   |   | F"1 DETEL   | 5.1 TITLE<br>5.2 NAME  |   | Change Addition  |  |
| STREET ADDRESS   |   |   | 5.3 STREET ADDRESS   |   |  |  |
| CITY-SF-7P   |   |   | 5.3 STREET ADDRESS   |   |  |  |
| TITLE  |   | DELETE  | 61 TITLE   |   | ☐ Change ☐ Addition  |  |
| NAME   |   |   | 62 NAME  |   |  |  |
| STREET ADDRESS   |   |   | 63 STREET ADDRESS  |   |  |  |
| CITY-ST-ZP   |   |   | 64 CITY-ST-ZIP   | <u> </u>  |  |  |
| <ol> <li>I do hereb<br/>information</li> <li>I am an off<br/>appears in</li> </ol> | ly certify that the information supping indicated on this annual report of ficer or director of the corporation of Block 12 or Block 13 if planged.               | led with this filling does not qualify<br>supplemental armyal report is to<br>or the receiver or trustee empower<br>or on an altachment with an add | y for the exemption stated<br>ue and accurate and that<br>ered to execute this repor-<br>ress. | in Section 119.07(3)(i), Florida Statutes<br>my signature shall have the same legal<br>t as required by Chapter 607, Florida St | . I further certify that the effect as if made under oath; that atules; and that my name |  |