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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

K51958 DOCUMENT #

(2)

8200 MANAGEMENT CORP. Principal Place of Business Mailing Address 3535 WINDMILL RANCH DR. 3535 WINDMILL RANCH DR. FT. LAUDERDALE FL 33331-3050 FT. LAUDERDALE FL 33331 3. Date Incorporated or Qualified 3a. Date of Last Report 12/16/1988 02/01/1996 Applied For 2. Principal Place of Business 2a. Mailing Address FEI Number 65-0089855 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country ZiD Country This corporation has liability for intangible tax under s. 199.032, Yes □ No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name TRUPKIN, DENIS P. 873 W. COCO PLUM CIRCLE Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 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, an 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 Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition D DELETE Change TITLE 11 TITLE TRUPKIN, LINDA NAME 1.2 NAME 3535 WINDMILL RANCH DR. 13 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZiP 14 CITY-ST-ZIP Addition DELETE ☐ Change TITLE 2.1 TITLE TRUPKIN, DENIS P. NAME 2.2 NAME 3535 WINDMILL RANCH DR. 23 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS C TY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CIY-SI-ZIP 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 animal 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 corpection 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 Charloed or on an attachment with an address.

FILED Jan 28 1997 8:00am Secretary of State

(96/6)

Daytime Phone #