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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

(0)

DOCUMENT # ALEXANDER BENJAMIN CORPORATION

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		I (antdit) 631 Brite (618) 11886 1211 malt 91815 Milkt allati Bibl) 81911 Bibli 1886
1106 HARRISON ST	1106 HARRISON ST		
SUITE 302	SUITE 302		DO NOT MIDITE IN THIS SDACE
HOLLYWOOD F 33019 US	HOLLYWOOD FL 33019 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
63	00		3. Date incorporated or Qualified 01/18/1989
2. Principal Place of Business	2a. Mailing Address		4. FE! Number Applied For
27 901 S. PARK RD.	26 901 S. PI	ARK RD.	65-0196985 Not Applicable
Suite, Apt, #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23 HOLLYWOOD, FL	28 HOLLYWOO	DD, FL	Trust Fund Contribution Added to Fees
Zip Country	Zip 29 33021 3	Country	8. This corporation owes or has paid the current year Intangible
24 33021 25 US	29 33021 3	<u> </u>	Personal Property Tax due June 30. Yes No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
ANTON, JARED G.		81 Name	
1106 HARRISON ST.		82 Street A	ddress (P.O. Box Number is Not Acceptable)
HOLLYWOOD FL 33019			
		83	±108
		_ •	HOLLYWOOD FL ST Zip Code 33021
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.			
		da Statutes.	Parsage 11
SIGNATURE WOCLESTY			PRESIDENT 1/12/98
Signature, typed or printed name of registered again 12. OFFICERS AND		Togistered Agent signature of	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME ANTON, TRACY S.		1.2 NAME	
STREET ADDRESS 1106 HARRISON ST		1,3 STREET ADDRESS	901 S. PARK DY # COX
CITY-ST-ZIP HOLLYWOOD FL		1.4 CITY-ST-ZIP	401 S. PARK RD. #108 HOWYWOOD, FL 33021
TITLE V	☐ DELETE	2.1 TITLE	Change Addition C
NAME ANTON, JARED		2.2 NAME	
STREET ADDRESS 1106 HARRISON ST.		2.3 STREET ADDRESS	901 S. PARK RD #108
CITY-ST-ZIP HOLLYWOOD FL		2, 4 CITY - ST - ZIP	901 S. PARK RD #108 HOLYWOOD, FL 33021
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		32 NAME	·
STREET ADDRESS		3.3 STREET ADDRESS	}
CITY-ST-ZIP		3.4. CITY-ST-ZIP	į
TITLE	DELETE	4,1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	İ
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	,
CITY-SI-ZIP		5.4 CITY - \$T - 21P	į
TITLE	☐ DÉLETE	6.1 TITLE	Change Addition
NAME	į	6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	j
CMY-ST-ZIP		6.4 CITY-ST-ZIP	
	h this filing does not qualify for t	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: