## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**FILED** Aug 07 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # K68676 (1)DOWNTOWN SQUARE, INC. Principal Place of Business Mailing Address 150 S.W. 12TH AVE. 150 S.W. 12TH AVE. SECOND FLOOR SECOND FLOOR POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 02/27/1989 04/09/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2463281 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 Personal Property Tax due June 30. Yes 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BEEBE, JOHN W 150 S.W. 12TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) SECOND FLOOR POMPANO BEACH FL 33069 83 84 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, 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** Signature, typed or printed name of registered agent and fille if applicable (NOTE: Registered Agent signature required when roinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE BERNSTEIN, ROBERT 1.2 NAME NAME 150 S. ANDREWS AVE. STREET ADDRESS 1.3 STREFT ADDRESS POMPANO BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE TITLE 2.1 TITLE JOHN BEEBE AVENUE # 200 BERNSTEIN, BRUCE NAME 2.2 NAME 5041 NW 64 DR. STREET ADDRESS 2.3 STREET ADDRESS **CORAL SPRINGS FL** FLORIDA 33069 POMPANO BEACH , CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETÉ Change Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY - ST - 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 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

7/29/97

appears in Block 12 or Block 13 if changed, or on an attachment with an address