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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Mar 10 1997 8:00am

Secretary of State

Daytime Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT #** K76096 HOLZL HOLDINGS, INC. Principal Place of Business Mailing Address % ALBERT B. HOLZL % ALBERT B. HOLZL 151 ALEXANDER PALM ROAD 151 ALEXANDER PALM ROAD **BOCA RATON FL 33432-7906 BOCA RATON FL 33432** 3. Date Incorporated or Qualified 3a. Date of Last Report 03/21/1989 02/19/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0114607 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Country Ζip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HOLZL, ALBERT B. 151 ALEXANDER PALM ROAD Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33432** 83 84 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 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 fam har with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6) 12 13. Change \_\_ Addition DPT DELETE 1.1 TITLE TILLE HOLZL, ALBERT B. NAME 1.2 NAME 151 ALEXANDER PALM ROAD 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE HOLZL, ALBERT B 2.2 NAME NAME 151 ALEXANDER PALM ROAD 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** C-TY - ST - 2IP 2. 4 CITY-ST-2IP ☐ DELETE ☐ Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY - ST - ZIP ... DELETE THE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-7IP City - S1 - ZIP Change Addition DELETE 5.1 TITLE 11111 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADORESS 5.4 CITY-ST-ZIP CITY - S1 - ZIP Addition TITLE DELETE 6.1 TITLE Change 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-S1-ZIF 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

AB HOL