

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 05 1996 8:00 am
Secretary of State

DOCUMENT # K94175 (2)

1. Corporation Name

BUY OWNER INTERNATIONAL, INC.



Principal Place of Business

5757 N ANDREWS WAY
SUITE 105
FT. LAUDERDALE FL 33309
US

Mailing Address

5757 N ANDREWS WAY
SUITE 105
FT LAUDERDALE FL 33309
US

3. Date Incorporated or Qualified
06/09/1989

3a. Date of Last Report
02/21/1995

2. Principal Place of Business

21 5757 N Andrews Way

2a. Mailing Address

26 5757 N Andrews Way

4. FEI Number

65-0003897

Applied For
Not Applicable

Suite, Apt. #, etc.

22 NO SUITE #

Suite, Apt. #, etc.

27 NO SUITE #

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

23 Ft Lauderdale

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

24 33309

Country

Zip

29

Country

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ECKERT, SCOTT A
5757 N. ANDREWS WAY
SUITE 400
FT. LAUDERDALE FL 33309

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 the applicable

(NOTE: Registered Agent signature required when removing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
D ECKERT, SCOTT A.
STREET ADDRESS
5757 N. ANDREWS WAY
CITY-ST-ZIP
FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME
DS ECKERT, CHARLES S.
STREET ADDRESS
5757 N. ANDREWS WAY
CITY-ST-ZIP
FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME
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STREET ADDRESS
5757 N. ANDREWS WAY
CITY-ST-ZIP
FT. LAUDERDALE FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Charles S. Eckert

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96

Date

(754)

711-7777

Do, Home Phone

CR2E034 (12/95)