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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

NAM:

STREET ADDRESS

CITY-ST-ZIP

DIVISION OF CORPORATIONS

1996 (4)L09010 DOCUMENT # 1. Corporation Name WILLIAM W. BLANCK ASSOCIATES, INC. Principal Place of Business Mailing Address 20515E COUNTRY CLUB DR 20515 E COUNTRY CLUB DR STF R44 NO MIAMI BOH FL 33180 NO MIAMI BCH FL 33180 3a. Date of Last Report 3. Date Incorporated or Qualified 08/11/1989 04/27/1995 4 FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0141059 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired  $\Gamma$ Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be City & State П Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s 199.032, Country Country Zip Yes X No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BLANCK, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 82 20515 E COUNTRY CLUB DR 844 83 N. MIAMI BEACH FL 33180 Zip Code 84 City 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 ri applicable (NOTE Registered Agent signature required when reinstaking) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition CELETE 1 1 TITLE TITLE BLANCK, WILLIAM W. 1.2 NAME NAME 20515 E CTRY CLUB DR 844 1.3 STREET ADDRESS STREET ADDRESS N. MIAMI BEACH FL 1.4 CHY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 2 1 TITLE TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 24 CITY - \$1 - ZIP CITY-ST-ZIP 30000179744<sup>0</sup> -04/29/96--01020--018 Addition DELETE 3 1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS \*\*\*200.00 3.4 CITY - ST- ZIP CITY-ST-7IP ☐ Cnange ☐ Addition DELETE 4 1 TiTi F 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 5. 1 TITLE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIE Addition □ DELETE 6 1 TITLE TIFLE

(12/95)

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14. If 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.

6.2 NAME

6.3 STREET ADDRESS

6 4 CITY - ST- ZIP

SIGNATURE: William W Blanck WILLIAM W BLANCK 4)20/96