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Mar 12, 1999 8:00 am Secretary of State

03-12-1999 90036 049 ***300.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L14710 1. Corporation Name

BANOV COMPANY

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Principal Place	of Business	Mailing Address				. £ 100510011 001 11811 01011 50001 510	4 Mari Alali 480		A1611 A1811 1461
2855 OCEAN DR		P.O. BOX 3628							
C-6		FO-BOX-3628				- M. T. 110 /	20405		
VERO BEACH FL 32963		VERO BEACH FL 32964-3628		DO NOT WRIT	E IN THIS S	SPACE			
US		US				3. Date Incorporated or Qualifed 09/11/1989			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26			NOT APPLICABLE			ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired			Additional		
22		27						equired	
City & State	=	City & State				6. Election Campaign Financing		•	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	—	Country	'		8. This corporation owes the curre		ngible Yes	□No
24	25	29 30				Personal Property Tax. 10. Name and Address of New R			
	9. Name and Address of Current	Registered Agent	81	Name		TO. Hame and Address of New K	sgisteres A	gent	_
BAN	OV, ROBERT P.		Ľ						_
	OCEAN DR			Street	Addres	ss (P.O. Box Number is Not Accepta	ole)		l
STE.			83	1					
	D BCH FL 32963		03	}					
			84	ĺ .			FL	1 '	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.									
· ·									
Organization, appear of printed realists of significant significan				nt signature	required v	when reinstating)	DATE		
12.	OFFICERS AND		13.		__	ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	Р	☐ DELETE 1	.1 TITLE					☐ Change	☐ Addition
NAME	BANOV, ROBERT P.	1	2 NAME						.
STREET ADDRESS	2855 OCEAN DR., STE. C-6	1	.3 STREE	TADDRESS					-
CITY-ST-ZIP	VERO BCH FL		.4 CITY-S	T-ZIP	<u> </u>				
TITLE	VTS	☐ DELETE 2	2.1 TITLE					Change	Addition
NAME			.2 NAME						
STREET ADDRESS	2855 OCEAN DR., STE. C-6	2	.3 STREE	TADORESS]				-
CITY-ST-ZIP			. 4 CITY-1	ST-ZIP					
TITLÉ		☐ DELETE 3	.1 TITLE					Change	☐ Addition
NAME		3	.2 NAME						Į
STREET ADDRESS		3	.3 STREE	T ADDRESS					ļ
CITY-ST-ZIP		3	4. CITY-	ŝT-ZIP	<u> </u>				
TITLE		☐ DELETE 4	.1 TITLE					☐ Change	☐ Addition \
NAME		. 4	2 NAME						
STREET ADDRESS		j 4	.3 STREE	T ADDRESS]
CITY-ST-ZIP		4	.4 CITY- S	T-ZIP	l				
TITLE		☐ DELETE :	.1 TITLE					☐ Change	Addition \
NAME		5	.2 NAME			_			
STREET ADDRESS			.3 STREE	TADDRESS	1				}
CITY-ST-ZIP		5	4 CITY-S	T-ZIP					
TITLE		☐ DELETE €	I.1 TITLE					☐ Change	☐ Addition
			2 NAME		1				

14. I 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP