FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L17873

(5)

Mailing Address

EVERETT PARKING CORPORATION

FILED Apr 02 1997 8:00am Secretary of State



BOCA RATON FL 33434			BOCA RATON FL 33434-4271						
						Date Incorporated or Qualified 09/20/1989		te of Last Re	eport
	ace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number			plied For
21		26	<u> </u>			65-0143834		No	t Applicable
Suite. Apt.	#, etc	27				5. Certificate of Status Desired Section Status Desired Fee Required			1
City & State		City & Sta	ite			6. Election Campaign Financing	_	\$5.00	May Be
23		28			, , , , , , , , , , , , , , , , , , , 	Trust Fund Contribution	<u> </u>	Added 1	
Zgs	Country	Zip	· · · · · · · · · · · · · · · · · · ·			8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes ☐ Yes ☐ No			
24	25	29 of Current Registered Age	30	T		Florida Statutes 10. Name and Address of New R			
NEO	IN, ALVIN	or carrett magistered Ago		81	Name	ID. Halle alle Addies of New 1	og:etolog r	- Botti	
								·····	
6745 WOODBRIDGE DR. BOCA RATON FL 33434				82	Street A	ddress (P.O. Box Number is Not Acceptable)			
				83					
				B4	City		FL	85 Zip (
11. Pursuant office or nagent I a	to the provisions of Section egistered agent, or both, in m familiar with, and accept	s 607.0502 and 607.1508, F the State of Florida. Such c the obligations of, Section 6	lorida Statutes, the hange was authoriz 307.0505, Florida Si	above red by tatutes	e-named the corp s.	corporation submits this statement for the location's board of directors. I hereby acc	purpose of apt the appo	changing it pintment as	s registered registered
SIGNATURE	Signature, typicd or pointed name of r	egistered agent and title if applicable.	(NOTE: Registe	ared Age	ent signature	required when reinstating)	DATE		
12.		CERS AND DIRECTORS	13	<u>. </u>		ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	DP	L.	DELETE 1.1	TITLE	Į			L Change	Addition
NAMÉ	DERN, ALVIN		1.2	NAME					
STREEL ADDRESS	6745 WOODBRIDGE I	DRIVE	1.3	STREET	ADDRESS	•			
CITY-S1-ZIP	BOCA RATON FL			CITY-S	T-ZIP			1 0	Address
TITLE		L	II.	TITLE	İ			Change	Addition
NAME			1	NAME		u.			
STREET ADDRESS					ADDRESS				
CITY-SI-7IP				4 CITY+! I TITLE	ST-ZIP		······································	Change	Addition
1/TLF NAME		_		NAME				L Onlange	/BOIRDI
STREET ADDRESS					ADDRESS				
CITY ST 7/P TITLE			7	I. CITY - :	01-TH			Change	Addition
NAME		•		2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-S	i				
TITLE			7"	TITLE				Change	Addition
NAME			5.2	NAME.					
STREET ADDRESS					ADDRESS				
City-St-7iP				CITY-S					
TITLE		L	· · · · · · · · · · · · · · · · · · ·	TITLE				☐ Change	Addition
NAME:			6.2	NAME.					
STREET ADDRESS			6.3	STREET	ADDRESS				
CITY-ST-ZIP			6.4	CITY-S	ST~ Z IP				
	the state of the s	and the state of t				totad in Caption 110 07/2\(ii) Etorida Statu	too I dualbor	and it all at	the a

4. 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 (page), or in an attachment with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/97

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