## 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

DOCUMENT #	L51921
L. Cornoration Name	

(9)

Corporation Name

F & R DEVELOPMENT CORP.							
Principal Place of Business  444 BRICKELL AVE. SUITE 1001 MIAMI FL 33131		Mailing Address  444 BRICKELL AVE. SUITE 1001 MIAMI FL 33131					
				3. Date Incorporated or Qualified 3a 02/19/1990	<ul> <li>Date of Last Report 04/25/1995</li> </ul>		
	- Deirosa	2a. Mailing Address		*	4. FEI Number	Applied	For
2. Principal Place	ce of Business	26			65-0186218	Not App	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Addition  Fee Require	
22		27				\$5.00 May	<del>-</del>
City & State		City & State			<b>6.</b> Election Campaign Financing Trust Fund Contribution	Added to Fee	
23 Zin	Country	<b>28</b>	Cour	ntry	8. This corporation has liability for intan	gible tax under s 199.03	12,
Zip <b>24</b>	25	29	30		Florida Statutes Yes		
	g. Name and Address of Curren	Registered Agent		<b>54</b> 7 N	10. Name and Address of New Regis	stered Agent	
				81 Name			
	M, RONALD Y.			82 Street Add	ress (P.O. Box Number is Not Acceptable)		
	ICKELL AVE.		ŀ	83			
SUITE						85 Zip Code	
	FL 33131			84 City	ration submits this statement for the purposited of directors. Thereby accept the appointr	<b>FL</b>   "   "	
SIGNATURE _	Signature, typed or printed name of registered agent OFFICERS ANI	D DIRECTORS	13.	Agent signature region	on when rendshing!  ADDITIONS/CHANGES TO OFFICE!		12 Addition
11TLF	DVS	DELETE	1.1 T			<u> </u>	
NAME	SCHRAM, RONALD Y 1420 N. OCEAN BLVDE S			REE I ADORESS			
STREET ADDRESS	PALM BEACH FL 33480		1	1Y-S1-7IP			
CITY - ST - ZIP TITLE	DP	☐ DELETÉ	2 1 T	ITLE		Change /	Addition
NAME	HESSEL, FRANK JAY		22 N	AME			
STREET ADDRESS	444 BRICKELL AVE.			INFET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33131	DELFTE	24C 3 1 T	TY-ST-ZIP		Change D	Addit-on
TRILE	DVT MCGEE, FRANKLIN A	Librar	32 N				
NAME STREET ADDRESS	444 BRICKELL AVE.			TREET ADDRESS			
CHY-SI-ZIP	MIAMI FL 33131		340	(1Y - \$1 - ZIP		Character C	Addition
TITLE		☐ DELETE	4.1	l l		Change []	Addition
NAMÉ			4.2 N				
STREET ADDRESS				THEET ADDRESS TTY-ST-ZIP			
CITY+ST-ZIP		☐ DELETE	5.1			Change	Addition
TITLE NAME				IAME			
STREET ADDRESS			. 535	TREE1 ADDRESS			
CITY-ST-ZIP				CITY - ST - ZIP		Change	Addition
TITLE		DELETE		TITLE		Orango	
NAME				IAME STREET ADDRESS			
222900A 133912			633	SINCEL RUUNESS			

64 City-St-7/P

14. I do hereby certify that the information supplied with this fring 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 or an attachment with an address.

SIGNATURE:

HULL JOSE OF PRINTED NAME OF SIGNING OFFICER OR OIL COURT

3/18/96

305-377-3343