

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

**FILED**  
**Mar 21 1997 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**DOCUMENT # L55030 (5)**

1. Corporation Name  
**1830 INVESTMENTS, INC.**



Principal Place of Business  
**2500 HOLLYWOOD BLVD.**  
**215**  
**HOLLYWOOD FL 33020**  
**US**

Mailing Address  
**2500 HOLLYWOOD BLVD.**  
**215**  
**HOLLYWOOD FL 33020-6615**  
**US**

3. Date Incorporated or Qualified **03/06/1990** 3a. Date of Last Report **03/05/1996**

2. Principal Place of Business  
 21 **1222 N.E. 4th Avenue**  
 Suite, Apt. #, etc.

2a. Mailing Address  
 26 **1222 N.E. 4th Avenue**  
 Suite, Apt. #, etc.

4. FEI Number **65-0178904** Applied For  Not Applicable

22 **Fort Lauderdale, Fl**  
 City & State

27 **Fort Lauderdale, Fl**  
 City & State

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 **33304-1925** 25 **Broward**  
 Zip Country

28 **33304-1925** 30 **Broward**  
 Zip Country

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

9. Name and Address of Current Registered Agent  
**LABOSSIERE, MARC P**  
**2500 HOLLYWOOD BLVD.**  
**215**  
**HOLLYWOOD FL 33020**

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

10. Name and Address of New Registered Agent

81 Name **Marc Labossiere**  
 82 Street Address (P.O. Box Number is Not Acceptable) **1222 N.E. 4th Avenue**  
 83   
 84 City **Fort Lauderdale** FL 85 Zip Code **33304**

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: *Marc Labossiere* **MARC LABOSSIERE** DATE: **03/17/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>D SALZANI, ALFREDO</b>	1.2 NAME	
STREET ADDRESS	<b>2429 RALAIGH ST.</b>	1.3 STREET ADDRESS	
CITY-STATE-ZIP	<b>HOLLYWOOD FL 33020</b>	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>D SALZANI, MICHAEL</b>	2.2 NAME	
STREET ADDRESS	<b>2429 RALAIGH ST.</b>	2.3 STREET ADDRESS	
CITY-STATE-ZIP	<b>HOLLYWOOD FL 33020</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-ST-ZIP	

14. 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 its 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, changed, or as an attachment with an address.

SIGNATURE: *Alfredo Salzani* **ALFREDO SALZANI** DATE: **02/19/97** DAYTIME PHONE: **954-925-7006**

CR2E034 (9/96)