

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

FILED
Aug 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Moore Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L60340

1. Corporation Name

Bofek Installation

Principal Place of Business

Mailing Address

18995 SW 256 Street
Homestead, FL 33031

3. Date Incorporated or Qualified

3a. Date of Last Report

2. Principal Place of Business

21 18995 SW 256 St.

Suite, Apt. #, etc

22 City & State

23 Homestead FL

Zip

24 33031

Country

25 USA

2a. Mailing Address

26 SAME

Suite, Apt. #, etc

27 City & State

28

Zip

29

Country

30

4. FEI Number

65-0177849

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

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No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

Vince Bofek

82 Street Address (P.O. Box Number is Not Acceptable)

18995 SW 256 Street

83

Homestead, FL 33031

84 City

Homestead, FL

85

Zip Code

33031

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

Vincent M. Bofek

Signature of officer or director of corporation or registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Vince Bofek
18995 SW 256 Street
Homestead FL 33031

☐ DELETE

TITLE
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11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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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 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.

SIGNATURE: Vincent Bofek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97 247-1019
Date Daytime Phone #

CR2E034 (9/96)