

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 # M36743 (6)

1. Corporation Name

CONCORDIA INVESTMENTS, INC.



Principal Place of Business

Mailing Address

3210 S. OCEAN BLVD. 3211 S. OCEAN BLVD
STE 505 STE. 904
HIGHLAND BEACH FL 33487
US

3210 S. OCEAN BLVD. 3211 S. OCEAN BLVD
STE 505 STE. 904
HIGHLAND BEACH FL 33487
US

3. Date Incorporated or Qualified

08/12/1986

3a. Date of Last Report

03/21/1995

2. Principal Place of Business

2a. Mailing Address

21 3211 S. Ocean Blvd

26 3211 S. Ocean Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #904

27 #904

23 Highland Beach FL

28 Highland Beach, FL

City & State

City & State

24 33487

Country

29 33487

Country

4. FEI Number

59-2709487

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COLMAN, PHILIP
3211 S. OCEAN BLVD. #903
HIGHLAND BEACH FL 33487

81 Name

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

83

84 City

FL

85 Zip 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME COLMAN, PHILIP
STREET ADDRESS 3210 SO OCEAN BLVD, STE 505
CITY-ST-ZIP HIGHLAND BEACH FL

1.1 TITLE ☐ Change ☐ Addition

TITLE STD ☐ DELETE

NAME COLMAN, FLORENCE
STREET ADDRESS 3210 SO OCEAN BLVD, STE 505
CITY-ST-ZIP HIGHLAND BEACH FL

1.2 NAME ☐ Change ☐ Addition

TITLE VP ☐ DELETE

NAME COLMAN, JULIAN
STREET ADDRESS 17 PARFIELD DRIVE
CITY-ST-ZIP NO YORK TORONTO CA

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE VP ☐ DELETE

NAME EVERETT, MICHAEL
STREET ADDRESS 136 W. COCONUT DRIVE
CITY-ST-ZIP LAKE WORTH FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing 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 on an attachment with my address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Everett 3/13/96

Date

Daytime Phone #

(407)-272-1596

CR2E034 (12/95)