

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996-11-96

B-3420 C

DOCUMENT # **M43538 (1)**

1. Corporation Name
DERMER INVESTMENTS COMPANY, INC.



Principal Place of Business: **2601 S. BAYSHORE DRIVE SUITE 1600 MIAMI FL 33133 US**
Mailing Address: **2601 S. BAYSHORE DRIVE SUITE 1600 MIAMI FL 33133 US**

3. Date Incorporated or Qualified: **12/18/1986**
3a. Date of Last Report: **07/26/1995**

21	21a	22	22a	23	23a	24	24a	25	25a	26	26a	27	27a	28	28a	29	29a	30	30a
	Principal Place of Business		Mailing Address	City & State	City & State	Zip	Zip	Country	Country	Zip	Zip	City & State	City & State	City & State	City & State	Zip	Zip	Country	Country
	1180 S. OCEAN Blvd.		1180 S. OCEAN Blvd.	BOCA RATON, FL	BOCA RATON, FL	33432	33432	Palm Beach	Palm Beach	33432	33432	BOCA RATON, FL	BOCA RATON, FL	BOCA RATON, FL	BOCA RATON, FL	33432	33432	Palm Beach	Palm Beach
	Suite, Apt. #, etc.		Suite, Apt. #, etc.																
	APT. 8E		APT. 8E																

4. FEI Number: **59-2753989**
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: **DERMER, BURTON 1180 S. OCEAN BLVD. APT. 8E BOCA RATON FL 33432**
81 Name: **DERMER, BURTON**
82 Street Address (P.O. Box Number is Not Acceptable): **1180 S. OCEAN BLVD. APT. 8E**
83 **BOCA RATON FL 33432**
84 City: **BOCA RATON** 85 Zip Code: **FL 33432**

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DERMER, BURTON	1.2 NAME	
STREET ADDRESS	1180 S. OCEAN BLVD., APT. 8E	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	DST <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DERMER, BEATRICE	2.2 NAME	
STREET ADDRESS	1180 S. OCEAN BLVD., APT. 8E	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	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-ST-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-ST-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-ST-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-ST-ZIP		6.4 CITY-ST-ZIP	

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 change is, or in an attachment with an address.

SIGNATURE: **Burton Dermer**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Burton Dermer, President

4/8/96 **407 361-0962**
Date Filed Phone #

CR2E034 (12/95)