FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N94000004011

COORDINATED CONTRACTING CORPORATION

Principal Plac	ce of Business	Mailing Address			
9960 CENTRAL PARK BLVD. SOUTH SUITE 201 BOCA RATON FL 33428		9960 CENTRAL PARK BLVD SUITE 201 BOCA RATON FL 33428-176			
			•	3. Date Incorporated or Qualified 08/16/1994	3a. Date of Last Report 05/01/1996
2. Principal F	2. Principal Place of Business 2a. Mailing Address			4. FEI Number 65-0560060	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25		Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No
<u> </u>	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Reg	lstered Agent
PARISH, DAVID 200 EAST BROWARD BOULEVARD SUITE 1500			81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
FT LAUDERDALE FL 33301			84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 617.0503, Florid			s, the above-named cor uthorized by the corpora	rporation submits this statement for the putation's board of directors. I hereby accept	urpose of changing its registered the appointment as registered
_	and accept the oblig	ations of Section of 7.0003, Plot	ida Sialules.		
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE	Registered Agent signature requ	Jired when reinstating)	DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TOTLE		☐ Change ☐ Addition
NAME	LERNER, HOLLY		1.2 NAME		
STREET ADDRESS % 9960 CENTRAL PARK BLVD. S., STE. 201		D. S., STE. 201	1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428		1.4 CITY - ST - ZIP		
TITLE	D DOUBLE	DELETE	2.1 TITLE		Change Addition
NAME	GOLD, RICHARD	D & OTC 004	2.2 NAME		
STREET ADDRESS	% 9960 CENTRAL PARK BLVI BOCA RATON FL	D. 3., 31E. 201	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D DOOK INTO IT FL	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		
NAME	GOLDSTEIN, MITCHELL		3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	% 9960 CENTRAL PARK BLVI	D S STE 201			
CITY-ST-ZIP	BOCA RATON FL 33428	D. O., OIL, 201	3.3 STREET ADDRESS		
TITLE	D	DELETE	3.4. City-St-ZIP 4.1 Title		Change Addition
NAME	KLOTZ, EDWARD		4. 2 NAME		E charge E Acouton
STREET ADDRESS	% 9960 CENTRAL PARK BLVI	D. S., STE. 201	4.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	• •	4.4 CITY-ST-ZIP		
TITLE	0	DELETE	5.1 TITLE		Change Addition
NAME	ROSENKRANTZ, CARL		5.2 NAME		
STREET ADDRESS	% 9960 CENTRAL PARK BLVI	D. S., STE. 201	5.3 STREET ADDRESS	Director	
CITY-ST-ZIP	BOCA RATON FL 33428		5.4 CITY-ST-ZIP	Aurelia Fernandos	

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 617, Florida Statutes; and that my name appears in Block 12 at Block 13 if entanged or an altachment with an address.

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

Aurelio Fernandez

Fort Lauderdale, FL 33309

500 West Cypress Creek Road, Suite 460

FILED

Jun 16 1997 8:00am

Secretary of State