


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000003919 (4)**
1. Corporation Name
761, INC.



Principal Place of Business 761 SW 13TH COURT POMPANO BEACH FL 33060	Mailing Address 761 SW 13TH COURT POMPANO BEACH FL 33060
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3. Date Incorporated or Qualified 07/09/1997
4. FEI Number <input checked="" type="checkbox"/> Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 7-4-98

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
**PURPURA, ANTHONY
761 SW 13TH COURT
POMPANO BEACH FL 33060**

10. Name and Address of New Registered Agent 81 Name RICHARD L. LOCASCIO 82 Street Address (P.O. Box Number is Not Acceptable) 1690 N.W. 61ST AVE. 83 84 City MARGATE FL 85 Zip Code 33063

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE **RICHARD L. LOCASCIO** *Richard L. Locascio Pres.* **1-19-98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	DP <input checked="" type="checkbox"/> DELETE
NAME	PURPURA, ANTHONY
STREET ADDRESS	761 SW 13TH COURT
CITY-ST-ZIP	POMPANO BEACH FL 33060
TITLE	D <input type="checkbox"/> DELETE
NAME	EISNER, HOLLIS
STREET ADDRESS	22980 SANDALFOOT BLVD
CITY-ST-ZIP	BOCA RATON FL 33428
TITLE	D <input type="checkbox"/> DELETE
NAME	CLUTE, JACK
STREET ADDRESS	5716 NW 22ND STREET
CITY-ST-ZIP	MARGATE FL 33063
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	TRES. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	RICHARD L. LOCASCIO
1.3 STREET ADDRESS	1690 N.W. 61ST AVE
1.4 CITY-ST-ZIP	MARGATE FL. 33063
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **RICHARD L. LOCASCIO** *Richard L. Locascio* **1-19-98 954-978-3682**
Signature, typed or printed name of signing officer or director Date

CR2E037 (10/97)