

FILED
Apr 12, 2004 8:00 am
Secretary of State

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DOCUMENT # P00000000844

1. Entity Name

OFFICE INVESTORS, INC.

Principal Place of Business

321 EAST HILLSBORO BLVD.

HILLSBORO BEACH FL 33441

Mailing Address

321 EAST HILLSBORO BLVD.

HILLSBORO BEACH FL 33441

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0970625

Applied For

Not Applicable

5. Certificate of Status Desired

MOORE

CR2E034 (11/03)

8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRIAN STREET

321 EAST HILLSBORO BLVD.

HILLSBORO BEACH FL 33441

TED STOTZER

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

321 E HILLSBORO BLVD

City

DEERFIELD BEACH FL

FL

Zip Code

33441

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/30/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution.

5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

P

NAME

STREET, BRIAN

STREET ADDRESS

321 E. HILLSBORO BLVD.

CITY-ST-ZIP

DEERFIELD BEACH FL 33441

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

VP

NAME

SCHOCKET, JEFFREY I

STREET ADDRESS

321 E. HILLSBORO BLVD.

CITY-ST-ZIP

DEERFIELD BEACH FL 33441

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

VP

NAME

COHEN, JAMES H

STREET ADDRESS

321 E. HILLSBORO BLVD.

CITY-ST-ZIP

DEERFIELD BEACH FL 33441

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-04

954-418-0228