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370 W CAMINO GARDENS BLVD

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000002539 (4)

BRADY & BRADY, P.A.

appears in Block 12 or Block 13

SIGNATURE:

Principal Place of Business

SUITES 336 & 337

370 W CAMINO GARDENS BLVD

BOCA RATON FL 33432-5816 **BOCA RATON FL 33432** 3. Date Incorporated or Qualified 3a. Date of Last Report 11/02/1992 04/11/1996 4, FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-0361131 Not Applicable 26 Suite, Apl. #, etc. Suito, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Country 8. This corporation has liability for intangible tax under s. 199.032, Country Zin Florida Statutes Yes No 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BRADY, FRANK R 370 W CAMINO GARDENS BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE 341** 83 **BOCA RATON FL 33432** Zip Code 84 City 85 11. Pursuant to the previsions 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Hogistered Agent's gnature required when reinstating) OFFICERS AND DIRECTO ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6 13. ☐ Change ___ Addition DELETE 1.1 TITLE TOTALE BRADY, FRANK R 1.2 NAME 3R2E034 370 CAMINO GARDENS BLVD 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 14 CITY-ST-ZIP CHY-ST 20 ... Addition DELETE Change ST 21 TITLE TITLE BRADY, FRANK 2.2 NAME NAME 370 CAMINO GARDENS BLVD STREET ACCORESS 2.3 STREET ADDRESS **BOCA RATON FL** 2. 4 CITY - ST - ZIP City-St-ZiP DELETE Change Addition 3.1 TITLE TREE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDINESS 3.4. CITY - ST - ZIP CITY - 51 - 21F Change Addition DELETE 4.1 TITLE THLE 4. 2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY-ST ZIE Add:tion DELETE Change 51 TITLE 1 ILF 5 2 NAME NAME **5 3 STREET ADDRESS** STREET ADDRESS 54 CITY-ST-ZIP City St-7 Addition Change DELETE 61 TITLE Tilif 62 NAME HAME STREET ADDRESS 63 STREET ADDRESS 64 CITY - ST-ZIP 14. It 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 607, Florida Statutes; and that my name

FILED Mar 25 1997 8:00am Secretary of State

