

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED

98 MAR 26 PM 1:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P92000007803 (9)  
1. Corporation Name

PRUCAN III, CORPORATION

Principal Place of Business

11900 Biscayne Blvd.  
Suite 760  
Miami, FL 33181  
US

Mailing Address

11900 Biscayne Blvd  
Suite 760  
Miami, FL 33181-2726  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 2450 N.E. Miami Gardens Drive

2a. Mailing Address

26 2450 N.E. Miami Gardens Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Second Floor

27 Second Floor

City & State

City & State

23 North Miami Beach, Florida

28 North Miami Beach, Florida

Zip Country

Zip Country

24 33180

25 Miami-Dade

29 33180

30 Miami-Dade

3. Date Incorporated or Qualified

11/24/1992

4. FEI Number

65-0371958

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SUPRASKI, LOUIS A.  
11900 BISCAYNE BLVD.  
SUITE 760  
MIAMI, FL 33162

10. Name and Address of New Registered Agent

81 Name

SUPRASKI, LOUIS A.

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

2450 N.E. MIAMI GARDENS DRIVE

83

SECOND FLOOR

84 City

NORTH MIAMI BEACH,

FL

85 Zip Code  
33180

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

Signature: Typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MARDER, HARRY

STREET ADDRESS 3845 BATHURST ST. #102

CITY-ST-ZIP TORONTO, CANADA

TITLE DST ☐ DELETE

NAME MARDER, SHLOMO M

STREET ADDRESS 3845 BATHURST ST., #102

CITY-ST-ZIP TORONTO, CANADA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

700002477047--4

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\*\*\*\*158.75 \*\*\*\*158.75

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-98

Date

Typed Name

CR2E034 (10/97)