

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 28 1997 8:00am
Secretary of State

DOCUMENT # P93000077075 (8)

1. Corporation Name
BDIT OF MARGATE, INC.



Principal Place of Business

101 N STATE RD 7
MARGATE FL 33063

Mailing Address

101 N STATE RD 7
MARGATE FL 33063-4500

3. Date Incorporated or Qualified
11/08/1993

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 4930 N. Pine Is Rd

27 Suite, Apt. #, etc.

28 Lauderdale FL

Zip

Country

29 33351

30 USA

4. FEI Number
65-0446769

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THE LAW FIRM LAWRENCE J SPIEGEL, CHARTERED
343 ALMERIA AVE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
DIANA E. LEVIN

82 Street Address (P.O. Box Number is Not Acceptable)
4930 N. Pine Island Rd

83

84 City
Lauderhill

FL

85 Zip Code
33351

11. Pursuant to the provisions of Sections 607.0102 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

Diana E. Levin, Pres. DIANA E. LEVIN Pres. 4/22/97

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME LEVIN, DIANE E
STREET ADDRESS 740 E PLANTATION CIR
CITY-ST-ZIP PLANTATION FL

TITLE ST
NAME LEVIN, ROBERT
STREET ADDRESS 740 E PLANTATION CIR
CITY-ST-ZIP PLANTATION FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 4930 N. Pine Island Rd
1.4 CITY-ST-ZIP Lauderdale FL 33351

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 4930 N. Pine Island Rd
2.4 CITY-ST-ZIP Lauderdale FL 33351

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

14. I do hereby certify that the information supplied with this form 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 this 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, changed, or on an attachment with an address.

SIGNATURE: *Diana E. Levin, Pres.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIANA E. LEVIN
PRES. 4/22/97 954-741-4433
Date Daytime Phone #

CR2E034 (9/96)