

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000086458 (5)**

1. Corporation Name

CORPORATE SQUARE BUILDING, INC.



Principal Place of Business

**2121 PONCE DE LEON BLVD.
PENTHOUSE II
CORAL GABLES FL 33134
US**

Mailing Address

**2121 PONCE DE LEON BLVD.
PENTHOUSE II
CORAL GABLES FL 33134
US**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**BOGGIO, LLOYD J
2121 PONCE DE LEON BLVD.
PENTHOUSE II
CORAL GABLES FL 33134**

3. Date Incorporated or Qualified

12/17/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0460468

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

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 607.0501, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Agent for Change of Registered Office

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

**D
BOGGIO, LLOYD J
2121 PONCE DE LEON BLVD., PENTHOUSE SUITE
CORAL GABLES FL 33134**

☐ DELETE

**D
MARCUS, STEWART
2121 PONCE DE LEON BLVD., PENTHOUSE SUITE
CORAL GABLES FL 33134**

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 of this report, or on an attachment to an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF AGENT OR OFFICER OR DIRECTOR

Lloyd J. Boggio 3/5/96 (305) 441-8188

CR2E034 (12/95)