4-26-97 B 5575 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

3708 W HILLBORO BLVD

DEERFIELD BEACH FL 33442-9411

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

DEERFIELD BEACH FL 33442

3708 HILLBORO BLVD



FLORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400008564 (4)

DEERFIELD BUZZ LTD., INC.

02/02/1994 04/25/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0463972 Not Applicable 21 26 Suite. Ant. #. etc Suite, 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 23 28 Trust Fund Contribution Added to Fees Ζıp Country Zip Country This corporation has liability for intappible tax under s. 199.032, Florida Statutes Yes No. No. Name and Address of New Registered Agent 24 25 29 30 g. Name and Address of Current Registered Agent Spectine Robert CAFFIENO, ROBERT 3708 W HILLBORO BLVD ERROR 82 Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33442** 63 84 City 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 tapilliar 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 signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6) 12. 13. DELETE Change Addition 1.1 TITLE TILLE CAFFIERO, LEONA 1.2 NAME NAME CONTINNIAL CT. -23490 LYON PD 1.3 SYREET ADDRESS STREET ADDRESS Beh PC. 33 YYV
Change Addition **BOCA-PATON FL** 1.4 CITY - ST - ZIP CHY-ST-ZIP DELETE 2.1 TITLE TifLE CAFFIERO, ROBERT W 2.2 NAME NAME 29490-LYONS RD STREET ADDRESS 2 3 STREET ADDRESS 33 YY\ **BOGA-RATON FL** 2 4 CITY-SY-ZIP CHTY-ST-ZIP DELETE TIFLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - \$1 - 212 DELETE Change Addition THILE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP DITY-ST-ZIP ☐ DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **63 STREET ADDRESS** 64 CiTY+ST-ZIP CITY-ST-ZIP 14. I 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