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

Maling Address

PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block 13

SIGNATURE:

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400009137 (8)

BENTLEY DESIGNERS AND BUILDERS, INC.

4891 N. UNIVERSITY DRIVE SUITE 310 CORAL SPRINGS FL 33067		SUITE 310	4691 N. UNIVERSITY DRIVE SUITE 310 CORAL SPRINGS FL 33067-4620			3. Date Incorporated or Qualified 02/04/1994	3a. Date of Last Report 06/03/1996				
2 Principal Et	lace of Business	2a. Mailing Ad	droee		_		4. FEI Number	00/0	סו עס		aliad Ear
21 21	RESCOLDERNOS	— ·	26				65-0530106	Applied For Not Applicable			
Suite, Apt	#, etc.	Suite, Apt.	#, etc						\$8.		dditional
22	,	27	27				5. Certificate of Status Desired	Fee Required			
City & Stati	J	City & State				****************	6. Election Campaign Financing		\$5	.00	May Be
23		28					Trust Fund Contribution				Fees
Zip	Country	Zip		Country	1		8. This corporation has liability for i			der s.	199.032,
24	25	29		30		······································			No		
	9. Name and Address of Curi	rent Registered Agent	<u></u>	81	Т	Name	10. Name and Address of New Re	gistered A	gent		
	LANDER, NATE			81		warne					
	STEVE KETOVER, C.P.A.				Ţ	Street Addre	eet Address (P.O. Box Number is Not Acceptable)				
	STERLING ROAD, SUITE 20	1			╀						
FI. I	LAUDERDALE FL 33312			83	1						
				84	T	City	177771111111111111111111111111111111111	FL	85	Zip C	ode
11. Pursuant office or r agent I a	to the provisions of Sections 607.0 egistored agent, or both, in the Sta m familiar with, and accept the ob	1502 and 607 1508, Flo ate of Florida. Such cha ligations of, Section 60	rida Statutes ange was au 7.0505, Flor	s, the abov ithorized by ida Statute	y 1 s	named corporati	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of the appo	chang pintme	ing its	registered egistered
SIGNATURE						····		DATE			
12.	Signature, Specific printed name of registrons OFFICERS (AND DIRECTORS	(NOTE:	13.	en:	it signature raquire	ed when reinstating) ADDITIONS/CHANGES TO OFFICE		DIREC	TOP	S IN 12
TITLE	DP CATHOLING		DELETE	1.1 TITLE			ADDITIONS/OFFARIACO TO OFFICE	2110 7410	Ch		Addition
NAME	HOLLANDER, NATE	-		1.2 NAME						····a·	
STREET ADDRESS	4691 SHERIDAN ST, SUITE	310		1.3 STREET	ĪΑ	ADORESS					
City-St-ZiP	CORAL SPRINGS FL 33067			1.4 CITY-5	ST-	- ZIP					
TITLE	, , , , , , , , , , , , , , , , , , ,		DELETE	2 1 TITLE					Ch	ange	Addition
NAME				2.2 NAME							
STREET ADDRESS				2.3 STREET	T A	ADDRESS					
CITY - ST - ZIP				2 4 CITY-	57	r-21P					
TITLE			DELETE	3 1 TITLE					L Cn	ange	Addition Addition
NAME				32 NAME							
STREET ADDRESS				3 3 STREE	T A	ADDRESS					
CITY - ST - ZIP				3.4. DITY+	ST	r- ZIP					
TITLE		Ц	DELETE	4 1 TITLE		Ì			[]] Ch	ange	Addition
NAME				4 2 NAME							
STREET ADDRESS				4 3 STREET		i					
CITY - ST - 7/P			DELETE	4.4 CITY-1	ST-	- ZIP	***************************************		T 1 0:		Addres :
TILE		LJ	DELETE	5 1 TITLE					L Ch	ange	☐ Addition
NAME				5 2 NAME							
STREET ADDRESS				5 3 STREE							
CITY - ST - 7IP			DELETE	5 4 CHTY-1 6 1 TITLE	ŞI.	- ZIP			☐ Ch	4040	Addition
TITLE		ليا	DELLIE	1					اللا نييا	वासीह	□ vonition
NAME				6 2 NAME							
STREET ADDRESS				6.3 STREE	T A	ADDRESS					

6.4 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