

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000010905 (5)

1. Corporation Name

THE BANYAN TREE DEVELOPMENT CORPORATION, INC.

Principal Place of Business

1600 S.E. 17TH ST.
SUITE 300
FT. LAUDERDALE FL 33316

Mailing Address

1600 S.E. 17TH ST.
SUITE 300
FT. LAUDERDALE FL 33316



2. Principal Place of Business

2a. Mailing Address

21

26

P.O. DRAWER 2986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

P

City & State

City & State

23

28

POMPANO BEACH FL

Zip

Country

Zip

Country

24

25

29

33072

30

USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/09/1994

3a. Date of Last Report

04/25/1995

4. FEI Number

65-0573271

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

10. Name and Address of New Registered Agent

HATCH, IRA C
1600 S.E. 17TH ST.
SUITE 300
FT. LAUDERDALE FL 33316

THE BANYAN TREE DEVELOPMENT, CORP.
P.O. DRAWER 2986
POMPANO BEACH FL 33072
P.O. DRAWER 2986
POMPANO BEACH FL 33072

1. Name

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

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 607.0505, Florida Statutes.

SIGNATURE

Anthony F. Graziano PRES.

April 24, 1996

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	GRAZIANO, ANTHONY	
STREET ADDRESS	1220 N RIVERSIDE DR	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	VDS	<input type="checkbox"/> DELETE
NAME	GRAZIANO, JOSEPHINE A.	
STREET ADDRESS	1220 N RIVERSIDE DRIVE	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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***200.00

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)(k), 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:

Anthony F. Graziano

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-96

954-785-1555

CR2E034 (12/95)