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FILED

Apr 30 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000011830 (4)

1. Corporation Name  
MALOMAR HOLDINGS, INC.

Principal Place of Business

2435 HOLLYWOOD BLVD.  
SUITE 204  
HOLLYWOOD FL 33020  
US

Mailing Address

2435 HOLLYWOOD BLVD.  
SUITE 204  
HOLLYWOOD FL 33020-6629  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

RESNICK, MALCOLM L  
3155 N. 39TH STREET  
HOLLYWOOD FL 33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE D  
NAME RESNICK, MALCOLM L  
STREET ADDRESS 3155 N. 39TH STREET  
CITY-ST-ZIP HOLLYWOOD FL 33021

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3. Date Incorporated or Qualified

02/09/1994

3a. Date of Last Report

04/29/1996

4. FEI Number

65-0474807

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

I, the undersigned, as a duly authorized officer or director of the corporation, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that my signature shall have the same legal effect as if made under oath; that I have caused this report to be prepared and filed as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)