

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000012084 (7)

1. Corporation Name

THE ENMAR COMPANIES OF POMPANO, INC.



Principal Place of Business

235 SE 11TH AVENUE  
POMPANO BEACH FL 33060

Mailing Address

P O BOX 1443  
POMPANO BEACH FL 33061  
US

3. Date Incorporated or Qualified  
02/14/1994

3a. Date of Last Report  
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21 1507 S.E. 8th AVENUE

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

23 DEERFIELD BEACH, FL.

27

City & State

24

Zip

Country

33441

USA

29

Zip

Country

30

4. FEI Number  
65-0480170

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOWEN, MARIAN  
235 SE 11TH AVENUE  
POMPANO BEACH FL 33060

81 Name

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

1507 SE 8th AVENUE

83

84 City

DEERFIELD BEACH

FL

85 Zip Code

33441

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME TAYLOR, ENOCH  
STREET ADDRESS 235 SE 11TH AVENUE  
CITY-ST-ZIP POMPANO BEACH FL 33060

☐ DELETE

TITLE VSTD  
NAME BOWEN, MARIAN  
STREET ADDRESS 235 SE 11TH AVENUE  
CITY-ST-ZIP POMPANO BEACH FL 33060

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

1507 SE 8th AVENUE  
DEERFIELD BEACH, FL. 33441

2.1 TITLE ☒ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

1507 SE 8th AVENUE  
DEERFIELD BEACH FL 33441

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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:

Marian Bowen MARIAN BOWEN

4-17-96

954-428-9865

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

56-41-72-96

CR2E034 (12/95)