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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000016172 (6) BRADLEY I. GORDON AND ASSOCIATES, INC. Principal Place of Business Mailing Address 3300 NE 191ST ST SUITE 1910 3300 NE 191ST ST AVENTURA FL 33180-2449 AVENTURA FL 33180 3. Date Incorporated or Qualified 3a. Date of Last Report 03/01/1994 04/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0480675 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 1405 Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔼 No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KRASS, HOWARD B 60100N Bradleu 1101 BRICKELL AVE Street Address (P.O. Box Number is Not Acceptable 82 -50HC 1405 **SUITE 1400** 83 **MIAMI FL 33131** 33180 84 City 85 Huentura 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, if an immunity, and accept the obligations of Section 607.0505, Parida Statutes. 4-22-97 SIGNATURE ranted pages of registers.) agent and otle if applicable Flagistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. ☐ Addition DELETE Change TITLE DPST 1.1 TITLE GORDON, BRADLEY I 1.2 NAME # 1405 > Suite 3300 NE 191ST ST STREET ADDRESS T.3 STREET ADDRESS **AVENTURA FL 33180** CITY-SE 2H 1.4 CITY - ST - ZIP Change Addition DELETE 11116 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP Cliv-St-77 DELETE Addition THLE 31 TITLE Change 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS C:TY-ST-ZP 3.4. CITY - ST-ZIP DELETE Change Addition 7111.6 4.1 TiTLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY - ST - ZIP DELETE Change Addition DILE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE Change MAME 6.2 NAME STREET ACORESS 6.3 STREET 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

| SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attac

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-97 931-7436

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FILED

Apr 29 1997 8:00am

Secretary of State