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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 22 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000016594 (1)

information indicated on this annual report of supplemental annual relation of the corporation of the receive or susceptions of the supplemental annual report of the receive or susceptions of the corporation of the receive or susceptions of the supplemental annual report of supplemental an

SIGNATURE:

16TH STREET OFFICE CORP.

4200 NW 16TH LAUDERHILL F US		4200 NW 18TH STREET Lauderhall fl 33313-5835 US								
						3. Date Incorporated or Qualified 03/02/1994		te of Las )1/199	t Report <b>6</b>	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21		26				65-0522178			Not Applicable	
Surte, Apt.		Suite, Apt. #, etc.			<del></del>	5. Certificate of Status Desired			\$8.75 Additional Fee Required	
City & State 23		City & State				6. Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees	
Ζφ <b>24</b>	Country 25	Zip 29	Countr 30	У			Yes [	] No	er s. 199,032,	
	9. Name and Address of Current	Registered Agent		. T		10. Name and Address of New Re	gistered A	igent_		
SILVERMAN, JEROME				81 Name						
5401 COLINS AVE. APT. 913 MIAMI BEACH FL 33140			82	1	Street Addre	ldress (P.O. Box Number is Not Acceptable)				
			83	3						
			8-	1	City		FL	<b>85</b> Z	ip Code	
SIGNATURE	m familiar with, and accept the obligat	and little if applicable (NC	OTE: Registered A			ed when reinstating)	DATE		200	
12.	OFFICERS AND		13.		<del></del>	ADDITIONS/CHANGES TO OFFIC				
TITLE	VP	DELETE	1.1 TITLE					Chan	ge Addition	
NAME STREET ADORESS	SILVERMAN, JEROM 5401 COLLINS AVE APT. 913		1,2 NAME		ADDRESS .					
CITY-ST-ZIF	MAIMI BEACH FL		1.4 C(TY							
TILE	P, S, T,	DELETE	2.1 TITLE				<del></del>	☐ Chan	ge Addition	
NAME	Papald Massie	_	2.2 NAME							
STREET ADDRESS	Ronald Massie	~	2.3 STREI	ET #	ADDRESS		:			
CITY - ST - ZIF	Lauderhill FL 3	3313	2. 4 CITY	- 51	T - ZIP					
TITLE		☐ DELETE	3.1 THTLE					Chan	ge L. Addition	
NAME			3.2 NAME							
STREET ADDRESS CITY-ST-ZIP			3.3 STREE 3.4. CITY			•				
UTY-ST-ZIF		DELETE	4.1 TITLE		1-212		<del></del>	Chan	ge Addition	
NAME		_	4. 2 NAM						-	
STREET ADDRESS			4.3 STRE	ET A	address					
CITY-ST-7IP			4.4 CITY	ST	∫- Z <del> </del> P					
TIILE		DELETE	5.1 TITLE					Chan	ge Addition	
NAME			5.2 NAMI	Ē						
STREET ADDRESS					ADDRESS					
011Y-ST-7#		I briere	5.4 CITY		I-ZIP			1.06	an   Address-	
TITLE		DELETE	6.1 TITLE					∐ Chan	ge [_] Addition	
NAME			6.2 NAME		(DDStee					
STREET ADDRESS			6.3 STRE	t í A	ADDRESS					

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 of the receiver of 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 of the receiver of supplemental annual report is true and accurate this report as required by Chapter 697, Florida Statutes; and that my name