

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 # P94000032224 (5)

1. Corporation Name

PROTOTYPE DEVELOPMENT, INC.



Principal Place of Business

1111 LINCOLN RD SUITE 800  
MIAMI BEACH FL 33139

Mailing Address

1111 LINCOLN RD SUITE 800  
MIAMI BEACH FL 33139

2. Principal Place of Business

2a. Mailing Address

21) Suite, Apt. #, etc.

26) Suite, Apt. #, etc.

22) City & State

27) City & State

23) Zip

Country

28) Zip

Country

24)

25)

29)

30)

9. Name and Address of Current Registered Agent

WEST, CYRUS  
1111 LINCOLN RD SUITE 800  
MIAMI BEACH FL 33139

3. Date Incorporated or Qualified

04/25/1994

3a. Date of Last Report

06/27/1995

4. FEI Number

65-0482808

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

81) Name

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

83)

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 607.0506, Florida Statutes.

SIGNATURE

Sign the type of corporate name of registered agent, as applicable.

(If the Registered Agent signature is required when transacting)

DATE

12. OFFICERS AND DIRECTORS

11) DP	WEST, CYRUS	1111 LINCOLN RD SUITE 800	MIAMI BEACH FL 33139
12) NAME			
13) STREET ADDRESS			
14) CITY-ST-ZIP			
15) TITLE			
16) NAME			
17) STREET ADDRESS			
18) CITY-ST-ZIP			
19) TITLE			
20) NAME			
21) STREET ADDRESS			
22) CITY-ST-ZIP			
23) TITLE			
24) NAME			
25) STREET ADDRESS			
26) CITY-ST-ZIP			
27) TITLE			
28) NAME			
29) STREET ADDRESS			
30) CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/96 305-538-8538

CR2E034 (12/95)