

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

FILED

Feb 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000032396 (1)

1. Corporation Name

PRIME MANAGEMENT, INC.



Principal Place of Business

6300 PARK OF COMMERCE BLVD
BOCA RATON FL 33487
US

Mailing Address

6300 PARK OF COMMERCE BLVD
BOCA RATON FL 33487-8228
US

3. Date Incorporated or Qualified

04/28/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0490321

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22. City & State

23

Zip

Country

27. City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SWATT, MYRON I
6300 PARK OF COMMERCE BLVD
BOCA RATON FL 33487

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV, Assist Sec
NAME SWATT, MYRON I
STREET ADDRESS 6300 PARK OF COMMERCE BLVD
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

TITLE DP
NAME RAIBLE, RON
STREET ADDRESS 6300 PARK OF COMMERCE BLVD
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

TITLE SD
NAME ADER, WILLIAM H
STREET ADDRESS 6800 PARK OF COMMERCE BLVD
CITY-ST-ZIP BOCA RATON FL

☒ DELETE

TITLE D
NAME JAY HENNICK
STREET ADDRESS 1140 BAY STRET, STE 4000
CITY-ST-ZIP TORONTO ON

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE vice President, Director
1.2 NAME + Assist Sec
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE S.T.D
5.2 NAME Phyllis Stapleton
5.3 STREET ADDRESS 6300 Park of Commerce Blvd
5.4 CITY-ST-ZIP Boca Raton FL

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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

1/7/97 501-997-4045

CR2E034 (9/96)