

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

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 JUN 12 PH 3:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000036116 (9)

1. Corporation Name

PHOENIX CONTINENTAL CORP.

Principal Place of Business

Mailing Address

1406 WEST COMMERCIAL BLVD.
TERMINAL 42
FORT LAUDERDALE FL 33309

1406 WEST COMMERCIAL BLVD.
TERMINAL 42
FORT LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

05/12/1994

4. FEI Number

65-0495495

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

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 2700 WEST CYPRESS CREEK RD

26 2700 WEST CYPRESS CREEK RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE D-131

27 SUITE D-131

City & State

City & State

23 FORT LAUDERDALE, FL

28 FORT LAUDERDALE, FL

Zip

Country

Zip

Country

24 33309

25

29 33309

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COBB, ROBERT E
4530 NORTH FEDERAL HWY.
FT LAUDERDALE FL 33308

81 Name

Charles H. Lichtman

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

1200 S. Pine Island Ad. Suite 100

83

84 City

Plantation

FL

85

Zip Code

33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 (and/or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPS
NARDONE, WILLIAM
4321 N.W. 10TH ST.
COCONUT CREEK FL 33066

1 1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

Michael T. Honey, President & Director
2700 West Cypress Creek Road
Suite D-131
Fort Lauderdale, Florida 33309

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(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 or is changed or on an attachment with an address.

SIGNATURE:

Signature and Typed or Printed Name of Signing Officer or Director

6/7/95

Date

(305) 975-6162

Daytime Phone #