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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000037030 (1)

YORKTOWN, INC.

Principal Place of Business

SIGNATURE: C

| 3200 PORT ROYALE DR 1806 FT LAUDEDALE FL 33308 US | | 3200 PORT | ROYALE DR | | | | | | | |
|------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------------------------------|------------|------|---------------------|----------------------------------------------------------------------------------------|---------------|------------------------------|---------------------------------------------|
| | | | 1808 FT LAUDERDALE FL 33308-7807 US | | | | | | | |
| | | | | | | | 3. Date Incorporated or Qualified 05/12/1994 | ate of Last F | e of Last Report | |
| 2. Principal P | lace of Business | 2a. Mailing / | Address | | | | 4. FEI Number | | | pplied For |
| 21 | | 26 | | | | | 65-0501074 | | N | ot Applicable |
| Suite, Apt. #. etc. | | Suite, Ar | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 | Additional |
| 22 | | 27 | | | | 7/77/// 1 | G. Certificate of Status Desired | | Fee R | equired |
| City & State | 0 | City & St | tate | | | | 6. Election Campaign Financing | _ | \$5.00 | May Be |
| 23 | | 28 | | · | | | Trust Fund Contribution | | | to Fees |
| Z _i p | Country | Zip | | Cour | ntry | • | 8. This corporation has liability for | | | s. 199.032, |
| 24 | 25 | 29 | | 30 | | ······ | . | Yes | | |
| | 9. Name and Address of Curre | nt registered Age | 9111 | | 81 | Name | 10. Name and Address of New Re | gistered | Agent | |
| CASEY, CHRISTOPHER J | | | | | °' | ivame | | | | |
| | O PORT ROYALE DR 1806 | | | ľ | 82 | Street Addr | ress (P.O. Box Number is Not Acceptal | ole) | | |
| FT | LAUDERDALE FL 33308 | | | | | , | | | | |
| | | | | | 83 | | | | | |
| | | | | ŀ | 84 | City | | | 85 Zip | Code |
| | | | | | | • | | FL | . ' | |
| office or r | to the provisions of Sections 607 05 egistered agent, or both, in the Stat m familiar with, and accept the oblic | ∘ of Florida. Such r | change was : | authorized | 1 hu | the cornoral | poration submits this statement for the place tion's board of directors. I hereby acce | ourpose o | f changing i pointment as | its registered registered |
| SIGNATURE | | | | | | | | | | |
| 12. | Signaturi Typist or presidence of registered as OF LICERS AN | ID DIRECTORS | IUN) | 13. | Age | eri signature requi | red when reinstating) ADDITIONS/CHANGES TO OFFIC | DATE |) DIBECTOR | OC IN 12 |
| TITLE | n | | DELETE | 11 117 | 1 F | | ADDITIONS/CHANGES TO OFFIC | JENO AN | Change | Addition |
| NAME | CASEY, CHRISTOPHER J | • | | 1 2 NA | | | | | CT overigo | Addition |
| | 3200 PORT ROYALE DR 180 | 2 | | | | | | | | |
| STREET ADDRESS | FT. LAUDERDALE FL | , | | | | ADDRESS | | | | |
| CITY-S1-ZIP TITLE | V V | | DELETE | 1 4 CIT | | T-ZIP | | | Change | Addition |
| | CLINTON M. CASEY | L | | 2 1 TIT | | | | | L. Gridinge | L.J Muulaan |
| NAME | 3200 PORT ROYALE DR. 180 | ۵ | | 2 2 NA | | | | | | |
| STREET ADDRESS | | 0 | | | | ADDRESS | 4 | | | |
| CITY - ST - ZIP | FT. LAUDERDALE FL. PTS | | DELETE | | | ST-ZIP | | | | T A LEW |
| TITLE | * * = | L | DELETE | 3 1 TiT | | | | | Change | Addition |
| NAME | CHRISTOPHER J. CASEY | ۵ | | 3 2 NA | | | | | | |
| STREET ADDRESS | 3200 PORT ROYALE DR. 180 | 0 | | | | ADDRESS | | | | |
| CITY - ST - ZIP | FT. LAUDERDALE FL | | I DELETE | 3.4. CI | | ST-ZIP | | | TT 6. | The second |
| TITLE | | L. | DELETE | 4.1 TIT | | 1 | | | ∐ Change | Addition |
| MAMÉ | | | | 4 2 NA | AME | | | | | |
| STREET ADDRESS | | | | 43 S1 | REET | ADDRESS | | | | |
| CITY - ST - ZIP | ************************************** | · | Drucer. | 4.4 Cit | | T-ZIP | | | 77. | |
| TITLE | | L. |] DELETE | 5 1 TIT | | 1 | | | L Change | Addition |
| NAME | | | | 5 2 NA | ME | - | | | | |
| STREET ADDRESS | | | | 5.3 ST | REET | ADDRESS | | | | |
| CITY - ST - ZIP | | | T | 5.4 CII | | T-ZIP | | | | |
| TITLE | | L | DELETE | 6.1 TIT | | | | | Change | ☐ Addition |
| NAME | | | | 6.2 NA | ME | | | | | |
| STREET ADDRESS | | | | 63 ST | REET | ADDRESS | | | | |
| CITY-S1-ZIP | | | | 6.4 CIT | | | | | | |
| Informatic | on indicated on this annual report or | supplemental appl | ual report is t | true and a | CCL | irate and that | d in Section 119.07(3)(i), Florida Statute t my signature shall have the same leg | al effect a | e if made ur | nder nath: thai |
| tam an o | TREET OF A FECTOR OF THE CORPORATION O | ir ine redeiver or ir | ustee empoy | veren in e | xec | ute this repo | rt as required by Chapter 607, Florida | Statutes; a | and that my | name |
| appears r | n Block 12 or Block 13 if changed, | on applicaciones | ii wiiii an adi | UI#SS. | | | j. | | | |
| | | 7 | | | | | / / | | | A 4 |