

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

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000037576 (3)

1. Corporation Name

POLERA BUILDING CORPORATION



Principal Place of Business

Mailing Address

680 WEST LINTON BOULEVARD
SUITE 200C
DELRAY BEACH FL 33444
US

680 WEST LINTON BOULEVARD
SUITE 200C
DELRAY BEACH FL 33444
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/17/1994

4. FEI Number

65-0490650

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 5030 Champion Blvd.

2a. Mailing Address

26 5030 Champion Blvd.

Suite, Apt. #, etc.

22 Suite #6-211

Suite, Apt. #, etc.

27 Suite #6-211

City & State

23 Boca Raton FL

City & State

28 Boca Raton FL

Zip

24 33496

Country

25

Zip

29 33496

Country

30

9. Name and Address of Current Registered Agent

BENTE, KATHLEEN E
SMOLER, LERMAN, BENTE & WHITEBOOK, P.A.
STE. 3940 NATIONSBANK TOWER 100 SE 2ND ST.
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

SKRLD, INC.

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

201 Alhambra Cir., Suite 302

83

84

City Coral Gables

FL

85

Zip Code 33134

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 obligation of Section 607.0505, Florida Statutes.

SIGNATURE

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

Steven M. Siegfried

(NOTE: Registered Agent signature required when reinstating)

DATE

3-11-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
NAME CATHERINE POLERA
STREET ADDRESS 6207 NW 23RD TERRACE
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

V
NAME ANTHONY POLERA
STREET ADDRESS 2672 NW 28TH TERRACE
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

S
NAME SALATORE POLERA
STREET ADDRESS 3279 CLINTMORE RD.
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

T
NAME CATHERINE POLERA
STREET ADDRESS 6207 NW 23RD TERRACE
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 supplementary annual reports 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]

1/28/98

81-457-6411

CR2E034 (10/97)