

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000045012 (9)

1. Corporation Name

MATHESON PROPERTIES, INC.



Principal Place of Business

SCOTT A SILVER % SILVER & GARRETT PA  
3350 SW 27TH AVE ONE GROVE VILLA  
COCONUT GROVE FL 33133

Mailing Address

SCOTT A SILVER % SILVER & GARRETT PA  
3350 SW 27TH AVE ONE GROVE VILLA  
COCONUT GROVE FL 33133

3. Date Incorporated or Qualified  
06/13/1994

3a. Date of Last Report  
03/10/1995

2. Principal Place of Business

2a. Mailing Address

21

25

4. FLE Number  
65-0554632

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

Zip

Country

Zip

Country

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

24

25

29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SILVER, SCOTT A ESO  
% SILVER & GARRETT PA  
3350 SW 27TH AVE ONE GROVE VILLA  
COCONUT GROVE FL 33133

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 607.1509, 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 or officer of the corporation

Printed Name of Agent, Signature, and Date of Filing

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DP  
SILVA, SCOTT A  
3350 SW 27TH AVE ONE GROVE VILLA  
COCONUT GROVE FL 33133

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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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

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96

305 858-7008

Daytime Phone

CR2E034 (12/95)