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Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # P94000054399 (8)

1. Corporation Name
Plantation Office Building, Inc.

Principal Place of Business	Mailing Address
1 Financial Plaza Suite #2001 Fort Lauderdale, FL 33394	1 Financial Plaza Suite #2001 Fort Lauderdale, FL 33394

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/24/94
4. FEI Number: 65-0521025 ☐ 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	2a. Mailing Address
21 1 Financial Plaza	26 1 Financial Plaza
22 Suite, Apt. #, etc. 2001	27 Suite, Apt. #, etc. 2001
23 City & State Fort Lauderdale, FL	28 City & State Fort Lauderdale, FL
24 Zip 33394 · 25 Country U.S.A.	29 Zip 33394 · 30 Country U.S.A.

9. Name and Address of Current Registered Agent

Marcus, Stewart
2121 Ponce de Leon Blvd.
Penthouse Suite
Coral Gables, FL 33134

10. Name and Address of New Registered Agent

81 Name: A.J. Belt III
82 Street Address (P.O. Box Number is Not Acceptable): 1 Financial Plaza
83 Suite #2001
84 City: Fort Lauderdale FL 85 Zip Code: 33394

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 A.J. Belt III 03/30/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Marcus, Stewart		1.2 NAME	
STREET ADDRESS	2121 Ponce de Leon Blvd., Pentehouse		1.3 STREET ADDRESS	
CITY-ST-ZIP	Coral Gables, FL 33134		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Boggio, Lloyd J.		2.2 NAME	
STREET ADDRESS	2121 Ponce de Leon Blvd., Pentehouse		2.3 STREET ADDRESS	
CITY-ST-ZIP	Coral Gables FL 33134		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	4/7
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	000002481470
STREET ADDRESS			6.3 STREET ADDRESS	-04/07/98--01039--017 ***150.00
CITY-ST-ZIP			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 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: 03-30-98 (954)523-2070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR · Date · Daytime Phone #

CR2E034 (10/97)