SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400064176 (8)

BEN-AIR, INC.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

FILED Sep 19 1997 8:00am Secretary of State

☐ Change

Addition



Principal Plac	e of Business	Mailing Address						*****	#171 FB#1
1725 W. COMMERCIAL BLDV., #10 FT. LAUDERDALE FL 33309		1725 W. COMMERCIAL BLDV #10 FT. LAUDERDALE FL 33309			DO NOT WRITE	IN THIS SPA	CE		
						3. Date Incorporated or Qualified	3a. Date of	4.4	tenort
						08/29/1994	1		вроп
9 Dringing C	Nana of Dunings	Do Molling Address					05/28/		
	Place of Business	2a. Mailing Address	—			4. FEI Number Applied For			
<u> 21 </u>		26				65-0516353 Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27						Fee Re	equired
City & Stat	te	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution Added to Fees			
Zip	Country Zip		L Cou	intry		8. This corporation owes or has paid the current year Intangible			
24	2529		30			Personal Property Tax due June 30. Yes No			
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	stered Age	nt	
ROS	MEISER, EDWARD			81	Name				
228	SE 6TH ST.		82 Street			Address (P.O. Box Number is Not Acceptable)			
DANI	IA FL 33004		102			to to to to the training to the trace			
				83					
•			84 C		City			E Zin /	Code
	·		lat City		City		FL °	5 Zip (Coue
effice or r agent. I a	to the provisions of Sections 607.6 registered agent, or both, in the Stam familiar with, and accept the ob-	ate of Florida Such change was	authorize	d by	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of cha t the appoint	anging it ment as	s registered registered
SIGNATURE	Signature, typed or printed name of registered	d agent and title (I applicable. (NO	1E: Registere	apA t	nt signature requi	red when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTOR	RS IN 12
TITLE	DELETE		1.1 TI	TLE				Change	Addition
NAME	RÖMEISER, EDWARD		1.2 NAME						
STREET ADDRESS	228 SE 6TH ST.		1.3 STREE		ADDRESS				
CITY-ST-ZIP	DANIA FL 33004		1						
TITLE		☐ DELETE		1.4 CITY+ST-ZIP 2.1 TITLE				Change	Addition
NAME			2.2 NAME		1				
STREET ADDRESS			2.3 STREET ADDRESS		AUUBESS				
CITY-ST-ZIP			2. 4 CITY - S1 - ZIP						
TITLE				TITLE				Change	☐ Acidition
NAME			3.2 N/	3.2 NAME			_	•	
STREET ADDRESS			3.3 S	REET	ADDRESS				
CITY-ST-ZIP	3.4		3.4. C	3.4. CITY-ST-ZIP					1
TITLE		DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 N	4. 2 NAME					
STREET ADDRESS			4.3 S1	4.9 STREET ADDRESS					
CITY-ST-ZIP	.T-ZIP		4.4 CI	4.4 CITY-ST-ZIP					İ
TITLE		☐ DELETE		5.1 TITLE				Change	Addition
NAME			5.2 N/	AME					
STREET ADDRESS			5.3 S	REET	ADDRESS				
	1				1				

14. I do 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.

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

DELETE

DIR