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

**₽**PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P94000076150 (9) **DOCUMENT #** 

Corporation N			•		. •	_	_	_	•	_	•	_	
ECHITY	ONE (	FPSII	ON	IN	C.								

EQUIT ONE (EPOILON) INC Mailing Address Principal Place of Business 777 17TH ST 777 17TH ST MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 3a. Date of Last Report 07/20/1995 10/10/1994 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0569932 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199.032 Country Country Zip Zιρ Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Street Address (P.O. Box Number is Not Acceptable) KATZMAN, CHAIM 777 17TH STREET R3 PENTHOUSE MIAMI BEACH FL 33139 Zip Code City 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 (NOTE: Registered Agont signature required when reinstating) CR2E034 (12/95) Signature, typed or printed name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1. 1 TITLE TITLE KATZMAN, CHAIM 12 NAME NAME 777 17TH STREET, PH 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 24 CITY - ST - ZIP CHY-ST-ZIP Change Addition DELETE 3 1 TITLE TETLE 3.2 NAME NAME 3.3. STREET ADDRESS STREFT ADDRESS 34 CITY - ST - ZIP CITY - ST - ZIP Addition DELETE 4. 1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 5 1 TITLE THLE 5.2 NAME

4 CITY-ST-ZIP umisher and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 14. I do hereby certify that the information supplied with certify that the information indicated on this annual repair that I am an officer or director of the comporate appears in Block 12 or Block 13 if changed or on in filing is volunt poor is true and accurate and that my signature shall have the same legal effect as if made under popular to execute this report as required by Chapter 607, Florida Statutes; and that my name r suppleme le receiver c annual

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY - ST - ZIP

6 1 TITLE

SIGNATURE: SIGNATURE AND TYPE

NAM-

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

DELETE

4/22/96 305 672 1234

☐ Change ☐ Addition