

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT #

P94000078218 (2)

1. Corporation Name:

PHOENIX-SCOTT HOLDINGS, INC.



Principal Place of Business

10723 SW 104TH ST
MIAMI FL 33176

Mailing Address

PO BOX 771353
CORAL SPRINGS FL 33077
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

SIEGEL, BERNARD F
10723 SW 104TH ST
MIAMI FL 33176

3. Date Reported or Quarter
10/25/1994

3a. Date of Last Report
04/11/1995

4. FEI Number
68-1585096

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

10. Name and Address of New Registered Agent

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 607.07(3)(b) and 607.1506, 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.07(3)(b), Florida Statutes.

SIGNATURE

Signature of person authorized to sign this report

Signature of person authorized to sign this report

DATE

12. OFFICERS AND DIRECTORS

1. NAME: DP BLECHMAN, BERTRAM
2. STREET ADDRESS: 10773 SW 104 ST
3. CITY, ST, ZIP: MIAMI FL

4. NAME: [] DELETE
5. STREET ADDRESS: [] DELETE
6. CITY, ST, ZIP: [] DELETE

7. NAME: [] DELETE
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9. CITY, ST, ZIP: [] DELETE

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11. STREET ADDRESS: [] DELETE
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13. NAME: [] DELETE
14. STREET ADDRESS: [] DELETE
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16. NAME: [] DELETE
17. STREET ADDRESS: [] DELETE
18. CITY, ST, ZIP: [] DELETE

19. NAME: [] DELETE
20. STREET ADDRESS: [] DELETE
21. CITY, ST, ZIP: [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME: [] Change [] Addition
2. STREET ADDRESS: [] Change [] Addition
3. CITY, ST, ZIP: [] Change [] Addition

4. NAME: [] Change [] Addition
5. STREET ADDRESS: [] Change [] Addition
6. CITY, ST, ZIP: [] Change [] Addition

7. NAME: [] Change [] Addition
8. STREET ADDRESS: [] Change [] Addition
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10. NAME: [] Change [] Addition
11. STREET ADDRESS: [] Change [] Addition
12. CITY, ST, ZIP: [] Change [] Addition

13. NAME: [] Change [] Addition
14. STREET ADDRESS: [] Change [] Addition
15. CITY, ST, ZIP: [] Change [] Addition

16. NAME: [] Change [] Addition
17. STREET ADDRESS: [] Change [] Addition
18. CITY, ST, ZIP: [] Change [] Addition

19. NAME: [] Change [] Addition
20. STREET ADDRESS: [] Change [] Addition
21. CITY, ST, ZIP: [] Change [] Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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 officer or director authorized 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:

Bertram Blechman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BERTRAM BLECHMAN

3-15-96

954-346-1927

CR2E034 (12/95)