

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000079904 (6)

1. Corporation Name
FHAC BUILDING, INC.



Principal Place of Business

1700 BANKS ROAD
MARGATE FL 33063

Mailing Address

1700 BANKS ROAD
MARGATE FL 33063

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/28/1994

4. FEI Number
65-0538836

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

21 36 MINNETONKA RD.

2a. Mailing Address

26 36 MINNETONKA RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 SEA RANCH LAKES, FL

City & State

28 SEA RANCH LAKES, FL

Zip

24 33308-2909

Country

25 US

Zip

29 33308-2909

Country

30 US

9. Name and Address of Current Registered Agent

SOKOLOW, ELLIOT
1700 BANKS ROAD
MARGATE FL 33063

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

36 MINNETONKA ROAD

83

84 City

SEA RANCH LAKES, FL

85 Zip Code

33308-2909

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 Elliott Sokolow
Signature typed or printed name of registered agent and title if applicable

ELLIOT SOKOLOW, PRESIDENT 7-2-98
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
SOKOLOW, ELLIOT P
1700 BANKS ROAD
MARGATE FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
SOKOLOW, ENYD L
1700 BANKS ROAD
MARGATE FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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
36 MINNETONKA RD.
SEA RANCH LAKES, FL 33308-2909

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
36 MINNETONKA RD.
SEA RANCH LAKES, FL 33308-2909

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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: Elliott Sokolow 7-2-98 (954) 785-2958
ELLIOT SOKOLOW

CR2E034 (5/98)