## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #
1. Corporation Name

P94000081181 (7)

ESQUIRE INVESTMENTS, INC.

| Principal Pt           | lace of Business  | Mailing Addres   | 65                                |                           |               |   | HII <b>biil</b> hihi 1900 Hill III II II II |
|------------------------|---|--|-----------------------------------|---------------------------|---------------|---|---|
| ·                      | ATHWEST 61 AVE.   | J  | 5505 NORTHWEST 61 AVE.            |                           |               |   |   |
| CORAL SPRINGS FL 33067 |   |  | CORAL SPRINGS FL 39067            |                           |               |   | La. Date of Local Course                    |
|                        |   |  |                                   |                           |               | 3. Date Incorporated or Qualified 11/01/1994  | 3a. Date of Last Report 08/22/1995          |
| 2. Princina            | al Place of Business  | 2a, Mailing Ad   | dress                             |                           |               | 4. FEI Number   | Applied For                                 |
| 21                     |   | 26   |                                   |                           |               | 65-0533511  | Not Applicable                              |
| Suite, Apt #, etc      |   | Suite. Apt   | Suite: Apt #, etc.                |                           |               | 5. Certificate of Status Desired  | \$8.75 Additional                           |
| 22                     |   | 27   |                                   |                           |               | <u>-                                    </u>  | L Fee Required                              |
| City & State           |   | hr)  | City & State                      |                           |               | 6. Election Campaign Financing Trust Fund Contribution  | \$5.00 May Be<br>Added to Fees              |
| <b>Z</b> (p)           | Country   | Zip  | T                                 | Country                   |               | 8. This corporation has hability for it   |   |
| 24                     | 25  | 29   | 30                                | J                         |               | Florida Statutes  | Yes 🔽 No                                    |
|                        | 9. Name and Address of  | Current Registered Agent                                     |                                   |                           |               | 10. Name and Address of New Re  | gistered Agent                              |
|                        | KRULL, TODO DAVID   |  |                                   | 81                        | Name          |   |   |
|                        | 5505 NORTHWEST 61 AVE.  |  |                                   |                           | Street Add    | ress (P.O. Box Number is Not Acceptab   | (e)   |
|                        | CORAL SPRINGS FL 33067  |  |                                   |                           |               |   |   |
|                        |   |  |                                   |                           |               |   | T-1 3 0 1                                   |
|                        |   |  |                                   | 84                        | City          |   | FL 85 Zip Code                              |
| i office of            | or registered agent, or both, in the<br>Lam familiar with, and accept the | e State of Florida, Such cha<br>e obligations of, Section 60 | inge was autho<br>7.0505. Florida | orized by<br>a Statutes   | the corporati | oration submits this statement for the pu<br>on's board of directors. I hereby accept<br>red when rematating) | the appointment as registered               |
| 12.                    | OFFICE  | ERS AND DIRECTORS  |                                   | 13.                       |               | ADDITIONS/CHANGES TO OFFIC  |   |
| TITLE                  | P   |  | DELETE                            | 1 1 THILE                 |               |   | Change Addition                             |
| NAME                   | KRULL, TODD DAVID   |  |                                   | 1.2 NAME                  | *******       |   |   |
| STREET ADORE           | 5505 NW 61ST AVE<br>CORAL SPRINGS FL                                      |  |                                   | 13 STREET                 |               |   |   |
| CITY-ST-ZIP            | CONAL SENINGS FL  |  | DELETE                            | 21 TITLE                  | 1 - 211       |   | Change Addition                             |
| NAME                   |   |  |                                   | 2.2 NAME                  |               |   |   |
| STREET ADDRE           | ESS   |  |                                   | 23 STREET                 | ADDRESS       |   |   |
| CITY-ST-ZIP            |   |  |                                   | 2 4 C/TY - 1              | ST - ZIP      |   |   |
| TITLE                  |   |  | DELETE                            | 3 1 TI*LF                 |               |   | , Change Addition                           |
| NAME                   |   |  |                                   | 32 NAME                   | ADDRESS       |   |   |
| STREET ADDRE           | ESS   |  |                                   | 33 STREET                 |               |   |   |
| TITLE                  |   |  | DELETE                            | 41 TiTLE                  | 31-211        |   | Change Addition                             |
| NAME                   |   | <b></b>  |                                   | 4 2 NAME                  |               |   |   |
| STREET ADDAL           | FSS   |  |                                   | 43 \$18661                | ADORESS       |   |   |
| CITY-ST-ZIP            |   | · · · · · · · · · · · · · · · · · · ·                        |                                   | 44 DITY 5                 | SI-ZIP        |   |   |
| TITLE                  |   |  | DELETE                            | 5 1 TITLE                 |               |   | Change Addition                             |
| NAME                   |   |  |                                   | 5 2 NAME                  |               |   |   |
| STREET ADDRI           |   |  |                                   | 5 3 STREET                |               |   |   |
| CITY-ST-ZIP            |   |  | DELETE                            | 5.4 CITY - 5<br>6.1 TILLE | 1 - ZIP       |   | Change Addition                             |
| NAME                   |   |  | D.C.                              | 6 2 NAME                  |               |   |   |
| STREET ADDR            | RESS  |  |                                   | 63 STREE                  | ADDRESS       |   |   |
| J. INCL. P. ADDIN      |   |  |                                   |                           |               |   |   |

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)(k). Florida Statules 1 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 617, Florida Statutes, and bat my name appears in Block 13 if changed, or on an attachment with an address

RE: WILL TOD DAVID KIULL
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

T 18811881 (18 1841 BARK BOTA BRITA BOTA BAKA BOKAT 1818) (1886 1886 1888 1887 1888)