## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

**FILED** AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Aug 19 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 POCUMENT # P94000082153 (5) BENITEZ & WAGONER P.A. Principal Place of Business Mailing Address 800 8 ANDREWS AVE 600 S ANDREWS AVE SUITE 403 SUITE 403 DO NOT WRITE IN THIS SPACE FT LAUDERDALE FL 33301 FT LAUDERDALE FL 33301 3. Date Incorporated or Qualified 3a. Date of Last Report 11/09/1994 05/14/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 65-0563782 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 10, Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Benitez, emilio 600 S ANDREWS AVE Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 403 FT LAUDERDALE FL 33301 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change ☐ Addition NAME BENITEZ, EMILIO 1.2 NAME 600 S ANDREWS AVE STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33301 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME WAGONER, JOSEPH 22 NAME 600 S ANDREWS AVE STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL 33301 CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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. The Report to

5.4 CITY-ST-ZIP

**6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP 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

6.1 TITLE

6.2 NAME

Addition

Change

DELETE