

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000093782 (8)

1. Corporation Name
112 RAND CORPORATION

Principal Place of Business
19810 SAWGRASS DR. 402
BOCA RATON FL 33434

Mailing Address
19810 SAWGRASS DR. 402
BOCA RATON FL 33434-3302



2. Principal Place of Business
21 7100 W. CAMINO REAL
Suite, Apt. #, etc.
22 400
City & State
23 BOCA RATON, FL
Zip Country
24 33433-5535 USA

2a. Mailing Address
26 7100 W. CAMINO REAL
Suite, Apt. #, etc.
27 400
City & State
28 BOCA RATON, FL
Zip Country
29 33433-5535 30 USA

3. Date Incorporated or Qualified
12/29/1994

3a. Date of Last Report
05/21/1996

4. FEI Number
65-0542989

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

9. Name and Address of Current Registered Agent

MADDEN, JOHN B
19810 SAWGRASS DR
STE 402
BOCA RATON FL 33434

10. Name and Address of New Registered Agent

81 Name
JOHN L. MADDEN
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 *J. L. Madden*
Signature, typed or printed name of registered agent and title if applicable

JOHN L. MADDEN Sec
(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPS	<input type="checkbox"/> DELETE
NAME	MADDEN, STEVEN H	
STREET ADDRESS	300 MERCER ST 21-A	
CITY-ST-ZIP	NEW YORK NY	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	MADDEN, JOHN	
STREET ADDRESS	19810 SAWGRASS DR 402	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	SECU/AGENT
2.3 STREET ADDRESS	JOHN L. MADDEN
2.4 CITY-ST-ZIP	7100 W. CAMINO REAL-400 BOCA RATON, FL 33433-5535
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
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 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: *J. L. Madden*
Signature, typed or printed name of signing officer or director

04/30/97
JOHN L. MADDEN
Sec

Date

Daytime Phone #

CR2E034 (9/96)