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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000009655 (8)

IOAN, INC.

Principal Place of Business Mailing Address RENTAL PROPERTY 6201 POLK ST **APTMENTS** HOLLYWOOD FL 33024-7813 HOLLYWOOD FL 33024 3. Date Incorporated or Qualified 3a. Date of Last Report 02/06/1995 04/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For ICAN INC APT. COMPLEX 6201 POUR ST 65-0649353 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired REATTAL APARTMENTS HOLLY WOOD Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be HOLLYWOOD NLWU Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intengible tax under s. 199.032, 33024 24 33024 BROWARD BROWARD Yes No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FEINBERG, JEFFREY 4851 SHERIDAN STREET **B2** Street Address (P.O. Box Number is Not Acceptable) **SUITGE 300** 83 HOLLYWOOD FL 33021 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 Ham familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or priction user ellof beginnered agent and the Papprosable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TOTAL ☐ Change ☐ Addition MIHES, IOAN NAME 1.2 NAME **6201 POLK STREET** STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 33024 CITY - ST - ZIP 14 CITY - ST - ZIP DELETE TITLE 21 TITLE ☐ Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7/F 2 4 CITY - S1 - ZIP DELETE TITLE 31 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHTY - ST - ZIE 3.4. CITY - \$1 - ZIP DELETE TILE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CHTY-SI-ZIF 5.4 CITY - ST - ZIP **5000020600\$** -01/16/97--01015--045 DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS ***165.00 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that he

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