

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000027539 (2)

1. Corporation Name

THE FLORIDA RENAISSANCE GROUP, INC.



Principal Place of Business

Mailing Address

935 48TH STREET
UNIT 1
MIAMI BEACH FL 33140

935 48TH STREET
UNIT 1
MIAMI BEACH FL 33140

3. Date Incorporated or Qualified

04/06/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1195 W Newport Ctr Dr

26 1195 W Newport Ctr Dr

4. FEI Number

65-0572919

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23 Deerfield Beach, FL

28 Deerfield Beach, FL

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

24 33442

25 USA

29 33442

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WINDLER, CYNTHIA A
935 48TH STREET
UNIT 1
MIAMI BEACH FL 33140

81 Name

Larry R. Leiby

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

Leiby Ferencik Libanoff & Brandt

83

150 South Pine Island Road, Suite 400

84 City

Plantation

FL

85 Zip Code
33324

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)

3.7.96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME WINDLER, CYNTHIA A
STREET ADDRESS 935 48TH STREET, UNIT 1
CITY-ST-ZIP MIAMI BEACH FL 33140

1.1 TITLE S/T/D ☒ Change ☐ Addition
1.2 NAME Windler, Cynthia
1.3 STREET ADDRESS 1331 VanBuren Street
1.4 CITY-ST-ZIP Hollywood, FL 33019

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE P/D ☐ Change ☒ Addition
2.2 NAME Davidson, Tom
2.3 STREET ADDRESS 663 Holloway Circle
2.4 CITY-ST-ZIP Deerfield Beach, FL 33442

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE C ☐ Change ☒ Addition
3.2 NAME Paul L. Styles, Jr.
3.3 STREET ADDRESS 2681 Brookwood Drive, NE
3.4 CITY-ST-ZIP Atlanta, GA 30305

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE V/D ☐ Change ☒ Addition
4.2 NAME Thomas W. Little
4.3 STREET ADDRESS 22 Victorian Lane
4.4 CITY-ST-ZIP Jupiter, FL 33458

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/96

Date

(305) 429-1411

Daytime Phone #

CR2E034 (12/95)