

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

FILED
Jul 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P95000055934 (0)

1. Corporation Name
2036 CORP.



Principal Place of Business
2036 N. DIXIE HIGHWAY
WILTON MANORS FL 33305

Mailing Address
2036 N. DIXIE HIGHWAY
WILTON MANORS FL 33305

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/19/1995

4. FEI Number
65-0605603

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 PO Box 1342

27 Suite, Apt. #, etc.

28 HALLANDALE FL

29 33008 30 Country

9. Name and Address of Current Registered Agent

DADE COUNTY CORPORATE AGENTS INC.
ATTN: ALAN J. LEWIS
20801 BISCAYNE BLVD., SUITE 505
AVENTURA FL 33180

10. Name and Address of New Registered Agent

81 Name ALAN LEWIS
82 Street Address (P.O. Box Number is Not Acceptable)
8220 STATE RD 84 SUITE 302
83
84 City FORT LAUDERDALE 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 *Alan Lewis, Registered Agent (Alan Lewis)* 6/11/98
Signature, typed or printed name of registered agent and firm if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LEWIS, ALAN J ESQ.
STREET ADDRESS 20801 BISCAYNE BLVD., #505
CITY-ST-ZIP AVENTURA FL 33180 ☒ DELETE
Registered Agent

TITLE Pres
NAME WERNER, KENNETH
STREET ADDRESS 2036 N. DIXIE HWY
CITY-ST-ZIP WILTON MANORS FL 33305 ☐ DELETE
President & Secretary

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ~~Kenneth Werner~~ ☒ Change ☐ Addition
1.2 NAME ~~PO Box 1342~~
1.3 STREET ADDRESS ~~Hallandale FL 33008~~
1.4 CITY-ST-ZIP ~~Hallandale FL 33008~~ *new list agent*

2.1 TITLE Pres
2.2 NAME sec
2.3 STREET ADDRESS ~~PO Box 1342~~
2.4 CITY-ST-ZIP ~~HALLANDALE, FL 33008~~

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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: *Alan Lewis* 4/29/98

CR2E034 (10/97)