

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000057501 (5)

1. Corporation Name

ANNUITY FINANCIAL SERVICES, INC.



Principal Place of Business

185 NORTH WEST SPANISH RIVER BLVD.
SUITE 170
BOCA RATON FL 33431

Mailing Address

185 NORTH WEST SPANISH RIVER BLVD.
SUITE 170
BOCA RATON FL 33431

3. Date Incorporated or Qualified
07/24/1995

3a. Date of Last Report
NA

2. Principal Place of Business

2a. Mailing Address

21 18500 Long Lake Drive
Suite, Apt. #, etc.

26 18500 Long Lake Drive
Suite, Apt. #, etc.

22 City & State
Boca Raton, FL

27 City & State
Boca Raton, FL

24 Zip 33496
Country U.S.A

29 Zip 33496
Country USA

4. FEI Number

65-0605373

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

10. Name and Address of New Registered Agent

SACKS, JACK
185 NORTH WEST SPANISH RIVER BLVD.
SUITE 170
BOCA RATON FL 33431

81 Name

JACK SACKS

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

18500 LONG LAKE DRIVE

83

84 City

BOCA RATON

FL

85 Zip Code

33496

11. Pursuant to the provisions of Sections 607.0102 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

[Signature]

4-30-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
SACKS, JACK
185 NORTH WEST SPANISH RIVER BLVD., #170
BOCA RATON FL 33431

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
P, S, T, D, M, R, V
JACK SACKS
18500 LONG LAKE DRIVE
BOCA RATON, FL 33496

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

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] JACK SACKS
PRESIDENT

3-14-96

DATE

407-483-7746

Daytime Phone

CR2E034 (12/95)