

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 # P95000061063 (0)

1. Corporation Name:

A.R. COOPER MANAGEMENT & RESEARCH, INC.



Principal Place of Business

2765 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33060

Mailing Address

2765 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33060

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

3. Date Incorporated or Qualified

08/08/1995

3a. Date of Last Report

4. FEI Number

65-0600554

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

COOPER, ERNEST A R
2765 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33060

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0402 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 type depends on the type of change being made.)

(Signature type depends on the type of change being made.)

(Signature type depends on the type of change being made.)

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
COOPER, ERNEST A R
2765 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33060

2. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

3. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P V P S T

2. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

3. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6. TITLE
NAME
STREET ADDRESS
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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/96

05/11/96

CR2E034 (12/95)