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

Mailing Address

2765 E OAKLAND PARK BLVD

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2785 E OAKLAND PARK BLVD



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000061063 (0)

A.R. COOPER MANAGEMENT & RESEARCH, INC.

FT LAUDERDALE FL 33080			FT LAUDERDALE FL 33306-1604						
						Date Incorporated or Qualified 08/08/1995	3a. Date of 05/01/1		aport
2. Principal Place of Business			2a. Mailing Address		4. 1	FEI Number	/	Ар	plied For
21			26			65-0600554			t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. (Certificate of Status Desired			Additional
City & State			City & State					Fee Re	
23			28			Election Campaign Financing Frust Fund Contribution		55.00 Added t	May Be
Zip		Country	7 ₁ p	Country		This corporation has liability for i			
24	25]	29	o ´			Yes X No		185.032,
	9. Name an	d Address of Current				Name and Address of New Re	gistered Agen	t	
276 FT L	OPER, ERNES 5 E OAKLAND AUDERDALE	PARK BLVD FL 33060		83 84 80 n	t Address (P.C	O. Box Number is Not Acceptable Cyphess (A)	井 リン FL ⁸⁵	33 6	260
 Pursuant to the provision of fections 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 									s registered registered
	Signature, typed or p			Registered Agent signature		einstat ng)	DATE		
12.	PVPS	OFFICERS AND		13.	A[ODITIONS/CHANGES TO OFFIC			
TITLE NAME	COOPER, E	DNEST A	☐ DELETE	1.1 TITEF			[_] (Change	☐ Addition
STREET ADORESS		KLAND PARK BLVD		1.2 NAME					
CITY-ST-ZIP		DALE FL 33060	•	1.3 STREET ADDRESS					,
TITLE		<u> </u>	DELETE	1.4 CITY-SI-7IP 2.1 TITLE			17 (Change	Addition
NAME				22 NAME				go	
STREET ADDRESS				2.3 STREET ADDRESS					
CITY-ST-ZIP				2 4 CITY-ST-ZIP					
TITLE			DELETE	3 1 THILE		TENTANTA VI IN AND LAND		hange	☐ Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 \$1REET ADDRESS					
CITY-ST-ZIP				3.4. C(1) y - S1 - ZIP					
TITLE			☐ DELETE	4.1 TITLE				hange	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP				4.4 C(1) Y - ST - 7(P					
TITLE			☐ DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET ADDRESS					
CITY-ST-ZIP		·		5.4 CITY - ST - ZIP					
TITLE			☐ DELETE	6.1 TITLE			C	hange	Addition
NAME				6.2 NAME					
STREET ADDRESS				63 STREET ADDRESS					

14. I do 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 (chapter 607, or on an attachment with an address.