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

Mailing Address

3003 YAMATO ROAD

BOCA RATON FL 33434-5337

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 27 1997 8:00am

Secretary of State

561-984-0999 Odviline Proce #

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000071949 (8)

REGENCY WOMAN, INC.

Principal Place of Business

3003 YAMATO ROAD

**BOGA RATON FL 33434** 

SIGNATURE:

, 00							3. Date incorporated or Qualified 99/18/1995		ate of Last Hi 1 <b>12/1996</b>	eport		
2. 21	Principal Pi	ace of Business	2a. Mailing Address 26			4, FEI Number 65-0609468	f Applied For					
22	Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional			
City & State			City & State			6. Election Campaign Financing \$5.00 May Be						
23		28			Trust Fund Contribution Added to Fees			lo Fees				
	Zip	Country	Ζφ	Coun	ılry		<ol> <li>This corporation has liability for intangible tax under s. 199.032,</li> <li>Florida Statutes</li> </ol>					
24 25 29 30 30 g. Name and Address of Current Registered Agent							Florida Statutes Yes I No  10. Name and Address of New Registered Agent					
STEWART G. GREENBERG, P.A.						Name	IO. Harris and Address of Refer to	110100	- Agoin			
7101 S.W. 102 AVENUE												
MIAMI FL 33173						82 Street Address (P.O. Box Number is Not Acceptable)						
ILIN WIR I E AVITO						83						
  -												
					84	City		FL	<b>85</b> Zip (	Code		
11	. Pursuanti	to the provisions of Sections 607.0502 a	and 607 1508, Florida Statu	tes, the abo	ove	e-named con	poration submits this statement for the p	urpose of	changing it	s 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												
	G14/11 (J. 11.	Signature: typed or printed name of registered agent a		TE: Registered /	Age	int signature requ	ired when reinstating)	DATE				
12		OFFICERS AND I		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	<del></del>			
TIT		DP PERMIT	☐ DELETE	1.1 TITL					Change	Addition		
NA		KING, MAXINE		1,2 NAM								
	REET ADDRESS	1074 KANE CONCOURSE BAY HARBOR ISLAND FL 33154				ADDRESS						
CiT	Y·ST·ZIP	V DAT HANDON ISLAND FL 33134	DELETE	1.4 CITY		T-ZIP			T Observe	Addison		
		BERMAN, BARBARA	L.J DECEIE	2.1 TITL					Change	Addition		
NA CT		4074 MANE CONCOURCE			2.2 NAME 2.3 STREET ADDRESS							
	REET ADDRESS	BAY HARBOR ISLAND FL 33154					•					
TIT	Y - ST - ZIP	1	☐ DELETE	2.4 CIT 3.1 TiTu		11-ZIF			Change	Addition		
NA		BERMAN, BRUCE		3.2 NAM					Carl Cricings			
	REET ADDRESS	1074 KANE CONCOURSE				ADDRESS						
	Y - ST - ZIP	BAY HARBOR ISLAND FL 33154		3.4. CIT								
TIT		S	DELETE	4.1 TITL					Change	Addition		
NA	ME	KING, SCOTT		4. 2 NA	ME							
STI	REET ADDRESS				EET.	ADDRESS						
CIT	Y · ST · ZIP	BAY HARBOR ISLAND FL 33154		4.4 CITY	Y-\$7	T-ZIP						
TIT	LE		DELETE	5.1 TiT).	.E				Change	Addition		
NA	ME			5.2 NAM	ΛE							
ST	reet address			5.3 STRI	EET	ADDRESS						
CIT	Y-S1-7# [			5.4 CITY	Y-S1	T- ZIP						
τn			[]] DELETE	6.1 TITL					☐ Change	Addition		
N.A				,6.2 NAM	ΛE							
	REET ADDRESS			6.3 STRI	EET	ADDRESS						
	Y-ST-ZIP	cotti tot the inf	all this files do	6.4 CITY			dia 0	. 16				
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 if changed, or on an attachment with an address.												