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Apr 21 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 # P95000072405 (0)

1. Corporation Name
PHIANDO, INC.

Principal Place of Business
1555 PALM BEACH LAKES BLVD.
SUITE 1000
W PALM BEACH FL 33401

Mailing Address
1555 PALM BEACH LAKES BLVD.
SUITE 1000
W PALM BEACH FL 33401



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 109 Brookhaven Court
Suite, Apt. #, etc.
22 City & State
23 Palm Beach Gardens, FL
Zip 33418 Country USA
24 33418 25 USA
26 4420 Beacon Circle
Suite, Apt. #, etc.
27 Suite 100
City & State
28 West Palm Beach, FL
Zip 33407 Country USA
29 33407 30 USA

3. Date Incorporated or Qualified
09/19/1995
4. FEI Number
65-0610300
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

9. Name and Address of Current Registered Agent
DAMON, CONRAD
1555 PALM BEACH LAKES BLVD.
SUITE 1000
W PALM BEACH FL 33401

10. Name and Address of New Registered Agent
81 Name
Damon, Conrad Esq.
82 Street Address (P.O. Box Number is Not Acceptable)
4420 Beacon Circle
83 Suite 100
84 City
West Palm Beach FL 85 Zip Code
33407

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE PS
NAME ZWEIB, JOHANN
STREET ADDRESS 1555 PALM BEACH LAKES BLVD STE 1000
CITY-ST-ZIP WEST PALM BEACH FL
TITLE VPT
NAME ZWEIB, RUTH
STREET ADDRESS 1555 PALM BEACH LAKES BLVD STE 1000
CITY-ST-ZIP WEST PALM BEACH FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PS
1.2 NAME ZWEIB, JOHANN
1.3 STREET ADDRESS 109 BROOKHAVEN COURT
1.4 CITY-ST-ZIP WEST PALM BEACH, FL 33418
2.1 TITLE VPT
2.2 NAME ZWEIB, RUTH
2.3 STREET ADDRESS 109 BROOKHAVEN COURT
2.4 CITY-ST-ZIP WEST PALM BEACH, FL 33418
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
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: *[Signature]*

4/6/98 (561) 842-3000

CR2E034 (10/97)